



## TAB 4A: APPROACH TO PROJECT & GENERAL RESPONSIBILITIES

*The Agency promotes a collaborative approach in working with professional services vendors and other stakeholders as it seeks to replace the current MMIS. Our direct knowledge of and demonstrated experience with IME, its systems, vendors, and operating model promotes a shared understanding and vision of priorities, plans, and progress with all stakeholders that will help guide a lower risk and quicker implementation.*

### State-of-the-Art MMIS IME Meets Needs Beyond Implementation

- 30 months to system go-live with phased functionality and conference room pilots
- Genuine solution and approach to maximize investment of bidder's library artifacts
- Alignment of our standardized methodology with the Agency's ACD model

IA MMIS-2 4A1-01

#### **4.3.4.2 Approach to Project & General Responsibilities (Label as Tab 4A in your submission)**

*Behind Tab 4A, the bidder shall describe their general interpretation and approach to the Agency's requested scope for this project and the Agency's timeline for the implementation of the new MMIS. Note that responses to these issues do not require references to specific RFP provisions and do not require that bidder's comply with the obligation to first restate an RFP provision before describing the bidder's approach. However, the bidder shall address Sections 2.1 and 2.2 of this RFP by complying with obligations set forth above in Section 4.3.4.1.*

Successful takeover, implementation, and operation of the Iowa Medicaid Enterprise (IME) Medicaid Integrated Data Administration Solution (MIDAS) requires a clearly defined approach that aligns with Agency objectives and identifies the activities, milestones, and timelines for each phase of the project. The Agency needs a system integrator with a solid reputation of delivering successful projects on time, and within budget. A demonstrated understanding of the technology and operations environment, and positive, continual stakeholder collaboration are key. We have successfully led many multi-vendor initiatives to completion, leading teams with transparency, in an environment of mutual respect and trust. Our clients in the U.S. and across the globe benefit from contained costs and higher performing organizations.

Tab 4A provides our general interpretation and approach to the Agency's requested scope and timeline for the implementation of the new MMIS as well as our governance strategy for collaborating with the Agency and other stakeholders. The Agency seeks a contractor to analyze, configure, deploy, and operate a new MMIS that meets the business needs of the IME. Concurrent to this effort, the Agency has requested that the contractor takeover the current MMIS.

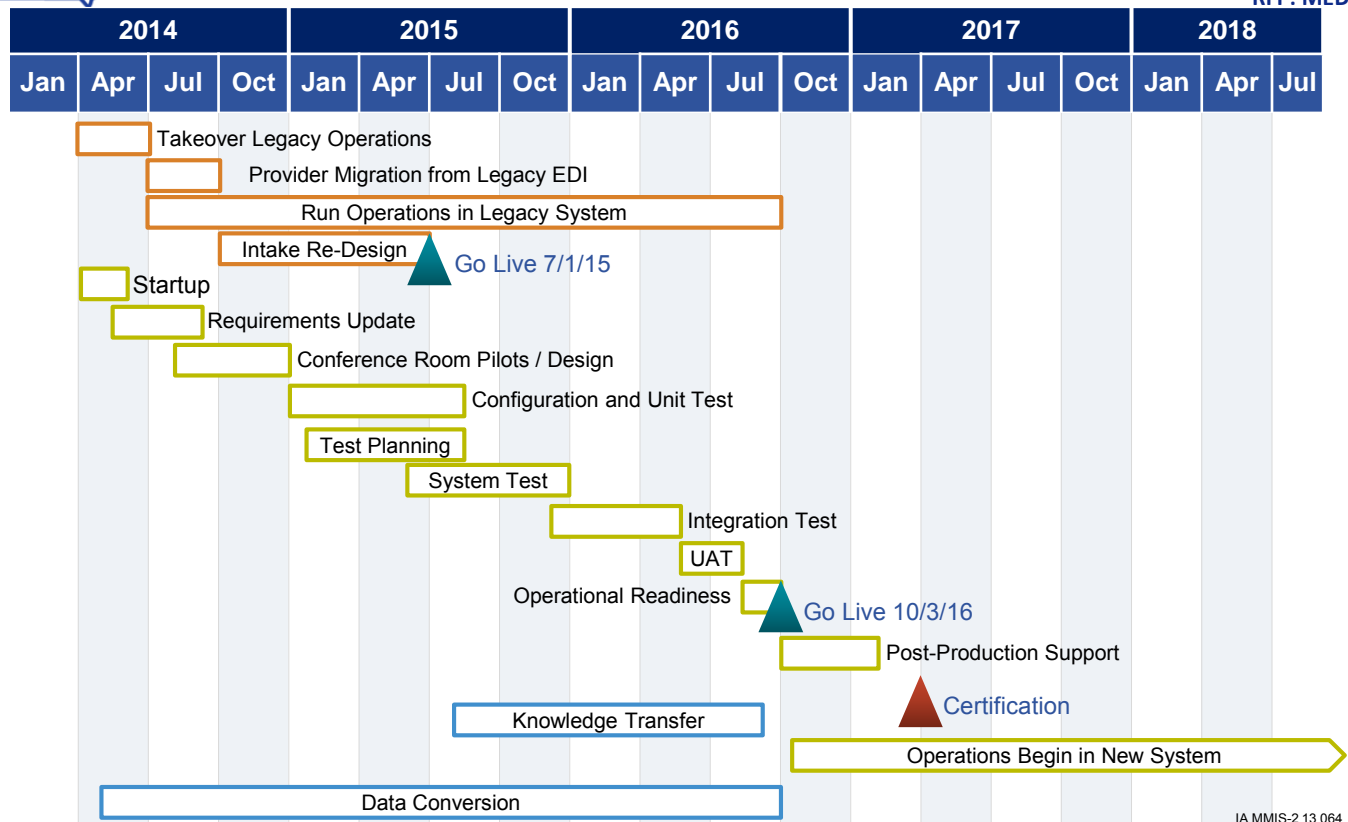
Considered the scope and Agency's timeline depicted in Figure 1-1 of the RFP, our overall solution began with major activities, decomposed into smaller, more manageable components. This improves accountability for project activities in our project plan and schedule. In doing so, a more detailed view of the takeover and startup scope can be made available. In decomposing the work, and seeing the demands that takeover, startup and ACD, and maintaining current operations could have on IME staff, we elected to propose a 30-month implementation schedule. This is both responsible and an optimal balance to successfully deliver the new MMIS on time and on budget and to help confirm the Agency get full enhanced federal financial participation.

Our solution and timeline provides the State a new MMIS in October 2016 based on a start date of April 1, 2014, as shown in Figure 4A-1. The 30-month timeline is 10 months earlier than depicted in RFP Figure 1-1. A new MMIS deployed months earlier than expected brings added benefits to the Agency. The Accenture Public Health Platform (APHP) replaces existing duplicative system services, which helps to lower total cost of ownership.

Operationally, the Agency would start seeing transactional metrics in real-time, helping workers to anticipate operations bottlenecks, and quickly identify areas that may need to be targeted for fixes. Dashboards provide access to data that is constantly changing across program areas and provide an immediate alert if an operation falls outside of an acceptable threshold. Members and providers also benefit from an early implementation as web portals give them self-service capabilities to interact with the new MMIS. An earlier start date to operations also means an earlier certified system.

For additional information on the contract phases, our plan to complete the work, and our project schedule, See Tab 4B, Section 4B.2 Project Plan and Schedule.

**We acknowledge and accept the 2.1, Overview of Scope of Work Requested in RFP Scope of Work (SOW) elements and requirements. Our proposed approach summarized below meets each RFP and contractor requirement.**



IA MMIS-2 13 064

Figure 4A-1. We structured our timeline to deploy key improvements that provide early efficiencies.

## 4A.1 OVERVIEW OF SCOPE OF WORK REQUESTED IN RFP

### 2.1 Overview of Scope of Work Requested in RFP

The Contractor shall support the following Iowa Medicaid functions:

- Claims Processing Function
- Member Function
- Provider Function
- Reference Function
- Medically Needy Function
- Management and Administrative Reporting (MAR) Function
- Third-Party Liability (TPL) Function
- Prior Authorization Function
- Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Function
- Managed Health Care Function
- EDI Support Function

Embracing the evolution of healthcare and Medicaid, MITA-aligned services guided the design and construction of our Medicaid product, APHP. APHP is a true service oriented architecture (SOA) framework, allowing for integration of commercial off-the-shelf (COTS) products and services that are insulated from each other, reusable, and orchestrated using an enterprise service bus (ESB). Our framework streamlines processes, removes redundant applications, and gives users easier access to information. This flexibility positions Iowa for the future, by creating a new MMIS that can change and respond to industry-wide trends and new regulations. We agree to support the functions listed in Section 2.1 of the RFP as we take over the current MMIS, and deploy the new MMIS. Table 4A-1 highlights our solution for the new MMIS and provides the proposal sections in which we further discuss each function.



**Table 4A-1: IME is well supported by APHP through its true-SOA design, and alignment with CMS Seven Conditions and Standards, MECT, and MITA 3.0**

| Iowa Medicaid Function                                 | Solution Highlights   | Proposal Response Sections   |
|--|---|--|
| Claims Processing Function                             | <ul style="list-style-type: none"> <li>Improved efficiency of scanning process</li> <li>Reduced turnaround time for RTP letters</li> <li>HIPAA X-12-compliant claims submission &amp; processing</li> <li>Initiated electronically, with portal, paper, fax, or phone</li> <li>APHP regularly updated with CMS guidelines as they evolve</li> </ul>   | 4B.3.1.a.3, Claims Receipt<br>4B.3.1.a.4, Claims Adjudication<br>4C.8, Claims Entry and Receipt<br>4C.9, Claims Adjudication   |
| Member Function  | <ul style="list-style-type: none"> <li>Flexible integrated architecture to collect member information from multiple sources</li> <li>Maintained and managed member information</li> <li>Processing of eligibility verifications</li> <li>Compliant with HIPAA requirements</li> <li>Managed Medicare Buy-In &amp; Part D exchange process</li> <li>Convenient online access to information</li> </ul>                   | 4B.3.1.a.1, Member Management<br>4C.5, Member Management   |
| Provider Function                                      | <ul style="list-style-type: none"> <li>Processing of claims from providers</li> <li>Provider lookup by name, partial name, NPI, SSN, or TIN and other criteria</li> <li>Support of universal provider identifiers, including types, specialties, NPI and taxonomy</li> <li>Provider self-service capabilities through portal with real-time access to information</li> <li>Compliant with HIPAA requirements</li> </ul> | 4B.3.1.a.2, Provider Management<br>4C.6, Provider Management   |
| Reference Function                                     | <ul style="list-style-type: none"> <li>Flexible update reference files and fee schedule updates</li> <li>Data is easily configurable to support Federal or Agency policy changes</li> <li>Supports code sets for the payment of Medicaid-covered non-health care services.</li> </ul>   | 4B.3.1.a.7, Reference Data Management and<br>4C.11, Reference Management   |
| Medically Needy Function                               | <ul style="list-style-type: none"> <li>Accept spenddown amounts from State eligibility data</li> <li>Spenddown systematically applied to member record</li> <li>Automated workflows alert when spenddown responsibility is met</li> <li>Real time status of current spenddown amounts on member record</li> </ul>   | 4B.3.1.a.1, Member Management<br>4C.7, Medically Needy Program   |
| Management and Administrative Reporting (MAR) Function | <ul style="list-style-type: none"> <li>Prepackaged T-MSIS reports</li> <li>Prepackaged EPSDT reports</li> <li>Prepackaged HCBS Waiver reports</li> <li>Meet federal reporting requirements</li> </ul>   | 4B.3.1.a.10, Program Management Reporting<br>4B.3.1.a.11, Federal Reporting<br>4C.14, Program Management and Federal Reporting |
| Third-Party Liability (TPL) Function                   | <ul style="list-style-type: none"> <li>Coordination of benefits associated at the benefit plan level</li> <li>Defined TPL coverage types as treatment sets</li> <li>Data matching from a variety of sources</li> </ul>  | 4B.3.1.a.8, Third Party Liability<br>4C.13, Third-Party Liability  |



| Iowa Medicaid Function                                | Solution Highlights  | Proposal Response Sections   |
|---|--|--|
| Prior Authorization (PA) Function                     | <ul style="list-style-type: none"> <li>Real-time information on PA status</li> <li>Web-based data entry, saving, and submission</li> <li>Inbound/outbound transactions via X12 278 formats</li> <li>Configurable workflows and processes for automated or manual processing that integrate with existing OnBase workflows</li> </ul> | 4B.3.1.a.5, Prior Authorization<br>4C.12, Prior Authorization  |
| Early and Periodic Screening, Diagnosis and Treatment | <ul style="list-style-type: none"> <li>Prepackaged federally-compliant EPSDT reports</li> <li>Automated workflow to trigger program correspondence automatically</li> <li>Product extracts identifying Medicaid children and immunizations needed that can be delivered to the automated immunization registry</li> </ul>            | 4B.3.1.a.1, Member Management<br>4B.3.1.a.17, Immunization Registry Interface  |
| Managed Health Care Function                          | <ul style="list-style-type: none"> <li>Process enrollment, re-enrollment, and disenrollment of MCO, PCCM, HMO, and PCP assignments</li> <li>Support of data exchange through EDI X12N standards</li> <li>Managed premium collection from members</li> <li>Following of standards to maintain privacy of data</li> </ul>              | 4B.3.1.a.14, Managed Care Enrollment<br>4B.3.1.a.15, Managed Care Organization<br>4C.17, Managed Care  |
| EDI Support Function                                  | <ul style="list-style-type: none"> <li>Support of secure data transfer using industry data exchange protocols, including ANSI X12 transaction formats</li> <li>Staffing for an EDI help desk</li> </ul>  | 4B.3.1.a.1, Member Management<br>4B.3.1.a.3, Claims Receipt<br>4B.3.1.a.18, Web Portal for Providers<br>4B.3.1.d, HIPAA and MITA Technical Requirements<br>4B.3.1.h, Data Quality Control<br>4C.1, Staffing<br>4C.8, Claims Entry and Receipt<br>4C.9, Claims Adjudication |

## 4A.2 GENERAL REQUIREMENTS AND SPECIFICATIONS

### 2.2 General Requirements and Specifications

*This section outlines the general requirements for the Contractor. Requirement subgroups that are described within this section include:*

1. Professional Services Interfaces
2. Systems Interfaces
3. Agency Interfaces
4. General Contractor Responsibilities
5. Communication
6. Contract Management
7. Personnel
8. System Access
9. Documentation
10. Knowledge Transfer
11. Security and Confidentiality
12. Compliance and Audits

To meet general requirements and specifications, this proposal includes delivery leadership directly experienced with the subgroups and requirements needed to support the Agency in building and operating the new MMIS and supporting a healthier future for Iowans. Sections 4A.2.1 through 4A.2.12 describe a reliable approach to deliver within the requirements subgroups listed for RFP Section 2.2.



#### 4A.2.1 IME Professional Services

##### 2.2.1 IME Professional Services

*The Contractor shall communicate with and develop interfaces with the IME Professional Services units:*

1. Medical Services
2. Pharmacy Medical Services
3. Provider Services
4. Member Services
5. Revenue Collections
6. Provider Cost Audits and Rate Setting (PCA)
7. Program Integrity

*The IME Professional Services and Program Integrity RFPs, contracts and proposals in the On Line Bidders Library.*

Using the Agency's governance process, we work with the IME Professional Services Units listed in the RFP to perform our duties and meet our contractual obligations. Successful collaboration with state entities like the Division of Data Management, the Department of Administrative Services Information Technology Enterprise, the ELIAS team, and the Iowa Health Information Network is one of the keys to the success of this project. Our collaborative approach is based on clear communication channels, and open and honest communication. This is driven from the leadership levels, through the project team.

To foster interdisciplinary cooperation during project planning and engage other vendors at project kick off, stakeholders, including the IME Professional Services vendors, are involved through project governance, conference room pilot sessions, and formal and informal meetings. Building enthusiasm and a sense of ownership of the new system early holds the key to successful adoption. To that end, we work with stakeholders to engage the appropriate State resources at the right time, enabling them to balance other responsibilities with the knowledge transfer, piloting, legacy data evaluation, testing, and other activities that are needed to implement a system that is configured to support how IME works and improves health outcomes for clients. Collaboration and open communication with vendors, and per RFP requirements, helps in capturing, maintaining, and retaining available data needed to meet other system contractors' requirements as it relates to our scope of work. We work cooperatively with other key contractor staff.

During the prior MIDAS project, the Agency created a governance structure that guided the delivery of this project and other projects within the IME. This process supports work with other contractors and with governance vendors—Project Director Services, POMI, QA/QC, and IV&V. During this work with the other vendors, open and honest interactions will promote a single, integrated team. At project start, we will confirm our internal governance model with the Agency, which is based on the guiding principles listed in Table 4A-2. This table identifies the roles and participants in each level of project and program management activities and processes. It also helps identify the resources required of the different project meetings.

**Table 4A-2: Our governance guiding principles integrates with IME governance processes**

| Governance Guiding Principles                         |   |
|---|---|
| Decision Making                                       | <ul style="list-style-type: none"><li>▪ Levels of decision making authority are established so that it is clear what decisions are made by each level of governance group</li><li>▪ Drive decision making down to lowest agreed upon level, and empower staff</li><li>▪ Create a culture of responsibility, authority, and accountability</li><li>▪ Follow pre-defined escalation procedures to resolve issues when agreed</li></ul>  |
| Project Management Processes (and meeting management) | <ul style="list-style-type: none"><li>▪ Reduce duplication in membership across groups</li><li>▪ Commit to attendance at all levels of governance meetings</li><li>▪ Include cross-organizational representation at every possible opportunity</li><li>▪ Meetings are action-oriented, focusing on decisions and issue resolution</li><li>▪ Make decisions during the meeting or assign issue to a committee member</li><li>▪ Each level of governance meeting is attended in person by the members identified</li><li>▪ Include cross-organizational representation at every possible opportunity</li><li>▪ When meeting attendance is delegated to an alternate, the alternate is given the same decision making authority as the member for whom they are substituting</li></ul> |





## Governance Guiding Principles

|                                  |   |
|----------------------------------|---|
| Communications                   | <ul style="list-style-type: none"><li>▪ Foster open and honest communication</li><li>▪ Clear communications about governance meeting decisions are delivered using multiple communication channels and vehicles</li><li>▪ Microsoft SharePoint is the central repository for governance information</li><li>▪ Openly discuss, plan for, and resolve issues and risks as a coordinated cross-functioning team</li><li>▪ Promote transparency within the IME</li></ul>        |
| Interacting with External Groups | <ul style="list-style-type: none"><li>▪ Manage interdependencies across State initiatives and stakeholders</li><li>▪ Decisions that have an impact on areas outside State initiatives are communicated by one of the designated governance members and manage interdependencies across the IME initiatives and stakeholders</li><li>▪ Decisions that have an impact on areas outside IME initiatives are communicated by one of the designated governance members</li></ul> |

To demonstrate effective multi-vendor environment performance, on the Texas Medicaid and Healthcare Partnership (TMHP) project, for example, we work with leadership from the Texas Health and Human Services Commission (HHSC) Council IT, Medical Transportation Program (MTP), Department of State Health Services (DSHS) and many other teaming partners to successfully operate the third largest Medicaid program in the country. This team is strongly committed to take over the current MMIS and deliver a new MMIS with the utmost professionalism, transparency, communication and positive outcomes for the Agency. Our philosophy is to collaborate with the Agency and Professional Services vendors in planning and executing this project to support shared success and healthy outcomes for the citizens of Iowa.

### 4A.2.2 Other State Systems Interfaces

#### 2.2.2 Other State Systems Interfaces

*The Contractor shall also interact with the Data Warehouse/Decision Support (DW/DS), call center system and other state systems as necessary. The Contractor shall be required to bring skilled staff with demonstrated experience in querying Medicaid-related data and preparing reports for Contractor and Agency use. The Contractor will designate a primary contact for developing queries and requesting assistance from the DW/DS system manager.*

APHP will interact with the Data Warehouse/Decision Support (DW/DS), call center systems, and other systems to effectively support the IME. APHP uses a variety of interface formats including real-time web services, batch transmission, Secure File Transfer Protocol (SFTP), and other mechanisms. Additionally, our Interface Team includes staff with significant experience designing and configuring interfaces and data exchange solutions for a variety of state government health care systems.

The Agency provided an understanding of the IME systems and technology environment and offered the opportunity to collaborate with stakeholders to identify the most effective interface solutions. One of the most important of these interfaces is between APHP and the Data Warehouse. Efficient and timely exchange of data between APHP and the Data Warehouse is paramount. In order to verify that data from APHP to the Data Warehouse is accurate and up-to-date, data from the various APHP transactional databases is replicated into the ODS (Operational Data Store). Data from the ODS are extracted, transformed and loaded (ETL) to the Dimensional Data Store (DDS). This database stores all historical versions of data, which are used to produce various reports and Data Warehouse updates.

APHP can deliver information updates to the call center system (i.e., interactive voice response (IVR)) through web services. These services to the Iowa call center system, allow the Agency to provide real-time access to the most current information that is stored on the MMIS. Also, we can configure APHP to support custom interfaces with the call center IVR, if required. We provide similar integration points and support for other state systems.

Skilled and experienced staff offer demonstrated experience querying Medicaid-related data and preparing reports for our and the Agency's use. This includes individuals like [REDACTED], our MIDAS Interface Manager. Nick was previously the Agency's Interface Manager on the MIDAS project. [REDACTED], Iowa MMIS Data Conversion Manager, is also a key member of the Interface Team. Pratap is a current member of the Iowa MMIS



Support Team. He has 10 years of MMIS experience, over 7 years leading legacy data conversion projects and over 3 years leading MMIS and healthcare data conversion projects. Both [REDACTED] and [REDACTED] have experience performing queries and reports. Our designated primary contact for developing queries and requesting assistance from the DW/DS manager is [REDACTED], our MIDAS Account Manager.

## 4A.2.3 Agency Interfaces

### 2.2.3 Agency Interfaces

*The Contractor shall interface with the following Agency or State entities:*

- 1. The Division of Data Management.*
- 2. The Department of Administrative Services Information Technology Enterprise.*
- 3. The Eligibility Support Team.*
- 4. The Iowa Health Information Network.*

*Interfaces include online updates to the IME data systems or file transfers among the contractors' data systems and the IME data systems. The Contractor can have online access and authority to update files on the IME data systems (except systems that other state agencies operate) as necessary to perform their required responsibilities. These updates require ongoing effective communication between the respective contractors and the Agency to assure timely maintenance that is transparent to the IME data systems.*

Effective communication between the Agency, other State agencies, and vendors is important in supporting timely maintenance that is transparent to the IME data systems. Through our experience working with the IME, we understand the unique scenarios for each Agency trading partner. Specifically, we understand and support the current batch interfaces with the Division of Data Management and the Department of Administrative Services Information Technology Enterprise. Similarly, APHP can integrate and interface via the current batch file process for the Eligibility Support Team on the Eligibility Integrated Application Solution (ELIAS) project and the Iowa Health Information Network.

APHP will support the Agency's batch interfaces and provide online updates to IME data systems. As the MMIS continues to evolve, APHP can efficiently be configured to support future interfaces or changes to existing interface formats. The flexible, configurable architecture of APHP allows for timely changes in the application to support the Agency's varying and changing interface needs. Defined governance processes help to maintain the interfaces and help make business continue seamlessly. If issues arise with an interface or changes are required, we proactively work with the Agency and trading partners to identify and implement a solution that benefits the IME. As we have demonstrated at Texas Medicaid, our ability to effectively communicate with trading partners through various mechanisms in a timely manner is essential to reducing impacts of interface changes or interface issues. For a discussion of APHP as well as interfaces, see Tab 4C.

## 4A.2.4 General Contractor Responsibilities

### 2.2.4 General Contractor Responsibilities

*The Contractor at all times shall assure compliance with the following obligations:*

*a. Respond to the Agency requests for information and other requests for assistance within the timeframe that the Agency specifies.*

As the Agency requests information or assistance, we respond within the specified timeframe. Our Project Management Office (PMO), led by [REDACTED], maintains an Action Item Log of requests and action items gathered during the course of project activities and meetings. We monitor the requests/actions on the list to confirm that each item is closed on or before the requested completion date. This process worked well on the prior MIDAS project.

*b. Prepare and submit to the Agency requests for system changes and notices of system problems related to the Contractor's operational responsibilities.*

Requests for system changes and notices of system problems related to our operational duties will be submitted to the Agency on an agreed-upon timeframe. Change management is one of the key components of our Project Management processes. Our change management process incorporates Microsoft Team Foundation Server (TFS) to record, track and manage the requests for changes and notices of system problems. Our change management process is detailed in Tab 4B, Section 4B.1.a.3, Project Management.

*c. Prepare and submit for Agency approval suggestions for changes in operational procedure to align with the new technologies and functional aspects of the new MMIS and implement the changes upon approval by the Agency.*

Suggestions for changes in operational procedure to align with the new MMIS are prepared and submitted for Agency approval. Changes are submitted and managed by the approved change management process and implemented upon Agency approval. As stated previously, we capture all change requests, including operational



procedures, system or business process items, in TFS. Using the automated capabilities of TFS, we link each change request back to the related requirement(s) and current system design documentation in TFS. To promote true transparency, the Agency and any IME team member can log in and view change requests and linked information in TFS. We also generate and export reports of change requests logged in the system, distribute these in accordance with the change management process, and upload them to SharePoint as point-in-time extracts. Section 4B.1.a.4, PMO Processes, Policies, and Procedures provides a full description of MIDAS project tools, including Microsoft TFS and other reporting tools.

*d. Ensure that effective and efficient communication protocols and lines of communication are established and maintained throughout the IME. The Contractor will take no action that has the appearance or effect of reducing open communication and association between the Agency and other contractor staff.*

Effective and efficient communication, collaboration and visibility within our projects are fundamental components to project delivery at Accenture. We foster open and honest interactions with the Agency, other vendors, and contractors, and work to build a community of trust. This occurs through focused customer relationship development, quality service delivery, continuous program improvements, an experienced and reliable delivery team with prior MIDAS experience, and market-changing technology.

Starting with our leadership levels,

open and honest interactions will occur with the Agency and IME staff and partners, PMO, IV&V and QA Services vendors. As displayed during the previous engagement, our leadership drives the team to develop mutual support for project inputs and outputs to best serve the Agency's needs.

As part of our Project Management Plan, collaboration with the Agency helps establish a governance model and processes early in the project that provide a clear path to decision making and escalation. Our governance guiding principles can be found in Section 4A.2.1 of Tab 4A. The Communication Plan, that describes lines of communication across the project and stakeholders, is created and maintained throughout the project. The processes enable effective communication protocols and articulate that no actions should be taken that will reduce open communications.

*e. Attend regular meetings with Agency management, MIDAS project oversight staff, and all other IME contractors as needed.*

During meetings, team staff are active, engaged participants looking to help resolve issues and move the project and IME forward.

*f. Provide to the Agency reports regarding Contractor activities, for which the Contractor shall negotiate the content, format, and frequency of these reports with the Agency.*

Regular activity reports and work conducted with the Agency provide information for management of the project and the Medicaid program. The specific content, format and report frequency for takeover, legacy operations, MIDAS implementation, and ongoing operations are negotiated during the Startup/Takeover Phase.

Communication and progress reports on our project activity and system services occur as agreed throughout the life of the project. Reporting focuses on status of the implementation effort to show progress against our plan. The data we report on is extracted from our project management toolset. Template status reports are developed and reviewed with the Agency to confirm expectations. For example, with your input we tailor and finalize the format and content to provide the following reports:

**Weekly Status Reports:** The Weekly Status Report provides a current snapshot of project progress. It recognizes project successes, but focuses on identifying areas requiring management attention and providing transparency for project risks and issues. Issues and risks identified in the Weekly Status Report are discussed during the Weekly Status Meeting. Discussing potential and actual project issues early and often helps prevent larger project issues that could potentially affect project quality, schedule, or budget.

**Monthly Status Reports:** The Monthly Status Report helps assess the overall health of the project. It provides the Agency with forward-looking data and plans for the coming month. The information provided in this report helps our leadership and the Agency verify that the project has and continues to progress according to defined expectations. It helps leadership from both teams determine if updates to the project work plan are required and provide executive summaries that can be used by the Agency in presentations to management and oversight bodies.

**Quarterly Status Reports:** Quarterly Status Reports focus on summarizing the overall status of the project. This report includes a complete and up-to-date Microsoft Project Work Plan and a CMS report.





In moving from implementation into operations, the developed set of standard operational reports provide the Agency with details and trend information on the Medicaid business. The reporting component uses Operational Data Store to automatically generate operational reports using in our solution. As with our implementation status reports, we review and gather feedback from the Agency staff to refine the format, content, and timing of these reports. The Agency benefits from access to these operational reports, with documentation to support review and auditability. Reporting supports full performance accountability, proactive intervention on critical issues, and spotting performance anomalies on a timely basis.

*g. Maintain operational procedure manuals in a format specified by the Agency and update the manuals when changes occur.*

Operational procedure manuals are maintained in a format specified by the Agency, and update these when changes occur per the change management process. The MMIS repository, a combination of SharePoint and Microsoft TFS, stores this information. For example, we maintain general documentation, system design documentation, user manuals and artifacts related to the MMIS System and Services Project.

The repository is a comprehensive storage for documents and other materials related to the project. Changes to documents in the repository would be completed in accordance with the change management and document management process that include:

- Establishing and communicating a standard directory structure
- Establishing and monitoring document naming conventions and standards
- Capturing and reporting on standard document elements, such as version number, author, change history and rationale, participants in document creation, and approval.

The check-in and checkout features of TFS and Microsoft SharePoint repository provide version control on all documentation. Additionally, standard features of TFS for secure version management and auditing promote the efficient management of documents and validate that they contain up-to-date material. Access-control features limit the editing and revision to only authorized individuals.

*h. Maintain IME business hours of 7:30 a.m. to 5:00 p.m., Monday through Friday. On-site Contractor staff shall observe the same IME business hours including State holidays.*

Business hours will be 7:30 a.m. to 5:00 p.m., Monday through Friday. Our on-site staff follows IME business hours including State holidays. We systematically follow client hours on project sites and did this previously on the MIDAS project.

*i. Provide electronic interfaces from any external data systems to the IME and other Agency data systems to support automated performance reporting.*

Our belief of transparency into the system and transactions processed is essential to operational excellence. We provide electronic interfaces from external data systems to the IME data systems to support automated performance reporting. We collect metrics on all our business activities, such as the number of transactions, and use an Operational Excellence Dashboard (Figure 4A-2) to report and display those metrics.

For system performance reporting, we have tools available to monitor and report on transaction volumes and response times, including those from interfacing with an external system.

## 4A.2.5 Communications

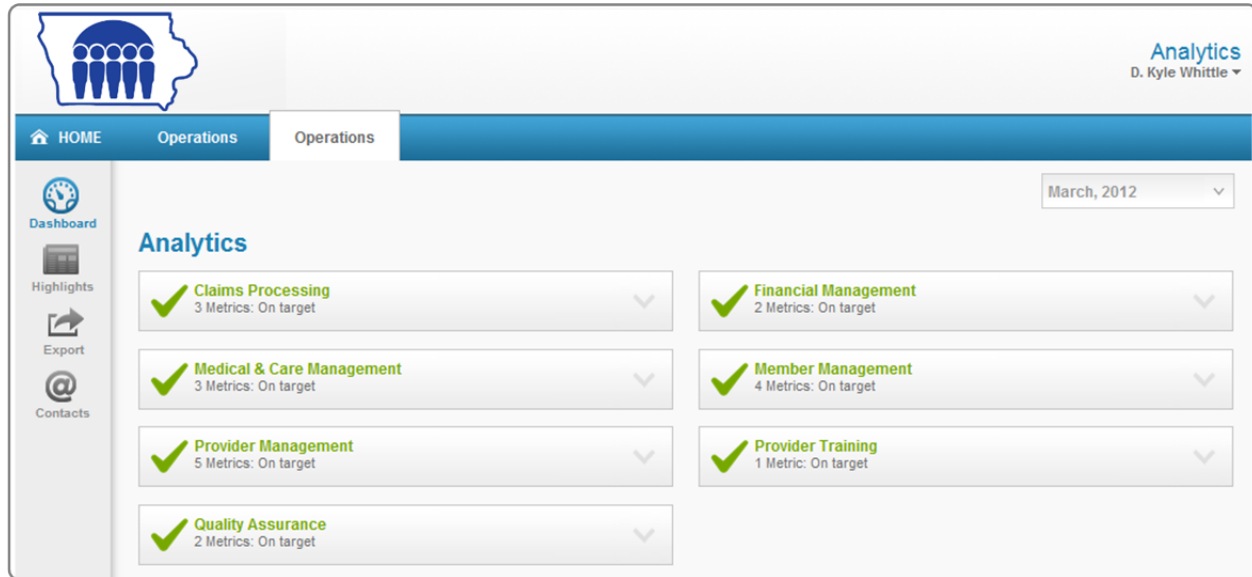
### 2.2.5 Communications

*The Contractor's responsibilities include:*

*a. Develop and provide standards and templates for all documentation and communications for review and approval by the Agency. Documentation and communication includes: 1. Status Reports. 2. System Generated Reports. 3. Meeting Agendas. 4. Meeting Minutes.*

*b. Maintain complete and detailed records of all meetings, ACD documents, presentations, project artifacts and any other interactions or deliverables related to the project described in the Contract and make such records available to the Agency upon request, throughout the life of the Contract.*

Communications and need for consistency in form, content organization and delivery times are important for projects of this magnitude. Collaboration with the Agency will be important to determine the most effective format, content and delivery expectations of the following critical communication documents and memorialize the information in our Communication Management Plan: 1) status reports, 2) system-generated reports, 3) meeting agendas, and 4) meeting minutes. Communication templates are initially standard based on ADM out-of-the-box formats. We then customize them to the Agency's specific needs and requirements. For instance, meeting minutes are generated and distributed within the agreed-upon timeframe to the Agency-approved distribution list which may vary at times depending on the topics and impacted stakeholders.



IA MMIS-2 13 082

**Figure 4A-2. The Agency can review and evaluate our operations performance at any time using our APHP operations dashboard.**

As described in Section 4B.1.a.5, Project Management Portal, we integrate with the MIDAS Portal and use it as the central repository for detailed records of meetings, ACD documents, presentations, work products, project artifacts, deliverables, and MIDAS project information. Daily use of the MIDAS Portal will resume Day One of the project to continue our communication and collaborative work with you.

## 4A.2.6 Contract Management

### 2.2.6 Contract Management

*The State of Iowa uses performance-based contracts. Agency oversight of Contractors' performance and payments to the Contractor are tied to meeting the performance standards identified in the Contract awarded through this RFP.*

The complexity of implementing and administering the Iowa Medicaid program requires a contract management approach that addresses performance cohesively during all contract phases, and working in harmony across multiple contract holders for services and additional products. Section 4A.2.6.4 describes our Contract Management processes. Iowa benefits from our focus on customer satisfaction, quality service delivery, service management to metrics, and continuous improvement. We understand and accept the performance-based structure of this contract. The PMO and Quality Assurance teams closely measure and monitor processes, conduct trend analysis, and identify potential issues and risks to seek to prevent service problems. Service delivery reporting is based on quantitative measures.

### 4A.2.6.1 Performance Reporting and Quality Assurance

#### 2.2.6.1 Performance Reporting and Quality Assurance

*The Contractor shall identify internal quality assurance activities. The scope of these activities includes the following functions:*

- Identify deficiencies and improvement opportunities within the system services contractor's area of responsibility.*
- Provide the Agency with a corrective action plan within ten business days of discovery of a problem found through the internal quality control reviews.*
- Agree upon timeframes for corrective actions.*
- Meet all corrective action commitments within the agreed upon timeframes.*

Our approach provides the Agency with a quality management plan, based on the Agency's IME goals and performance standards, proactively verifies quality and responsiveness objectives are met. This will minimize potential performance issues for efficient, effective delivery and identify deficiencies and improvement opportunities. The Quality Assurance Director (QAD) conducts quarterly project reviews to verify compliance with project plans, standards and leading practices. The QAD meets with the client team leadership to conduct



Quality Assurance reviews. The focus of these reviews is to confirm the business value anticipated by the client, risks are being mitigated, and opportunities for improvement are being actively worked.

Our comprehensive Quality Management Approach, tailored to the project, monitors quality, schedule, and budget. We are committed to quality management and have built it into our processes via Accenture Delivery Methods (ADM). We develop the Quality Management Plan (QMP) using our ADM template as a starting point. Figure 4A-3 shows key components of our QMP and interaction during the project.

Our Quality Management program is enhanced due to our overall project management processes having been recognized as CMMI Level 4. An independent evaluator conducted our Standard CMMI Appraisal Method for Process Improvement (SCAMPI) assessments in 2004 and 2006 and assessed our program management processes at CMMI Level 4. The US Department of State, Integrated Logistics Management System (ILMS) program was one of the projects included in the 2006 evaluation. ILMS received higher quality deliverables and on-time performance from our investment in Level 4. We bring the same methodologies, standards, and dedication to the Agency and the IME partners. Characteristics of our quality processes include:

- Apply structured governance to integrate multiple IME stakeholder groups into one cohesive team
- Provide an early warning / detection system to identify deficiencies and address possible issues
- Employ standard quality methodologies and performance metrics including operations performance metrics
- Quality reviews throughout the lifecycle, including our peer review process and external quality reviews
- Work with the Agency to incorporate continuous improvement
- Align with ITIL Continuous Service Improvement for improvement opportunities
- Implement concepts from Lean Six Sigma Continuous Improvement

Within ten business days of discovery of a problem found through the internal quality control reviews, we provide the Agency with a corrective action plan (CAP) as outlined in the QMP. The plan includes agree upon timeframes for corrective actions and meet the commitments for these actions within these timeframes. This is demonstrated from having successfully executed a similar process at Texas Medicaid.

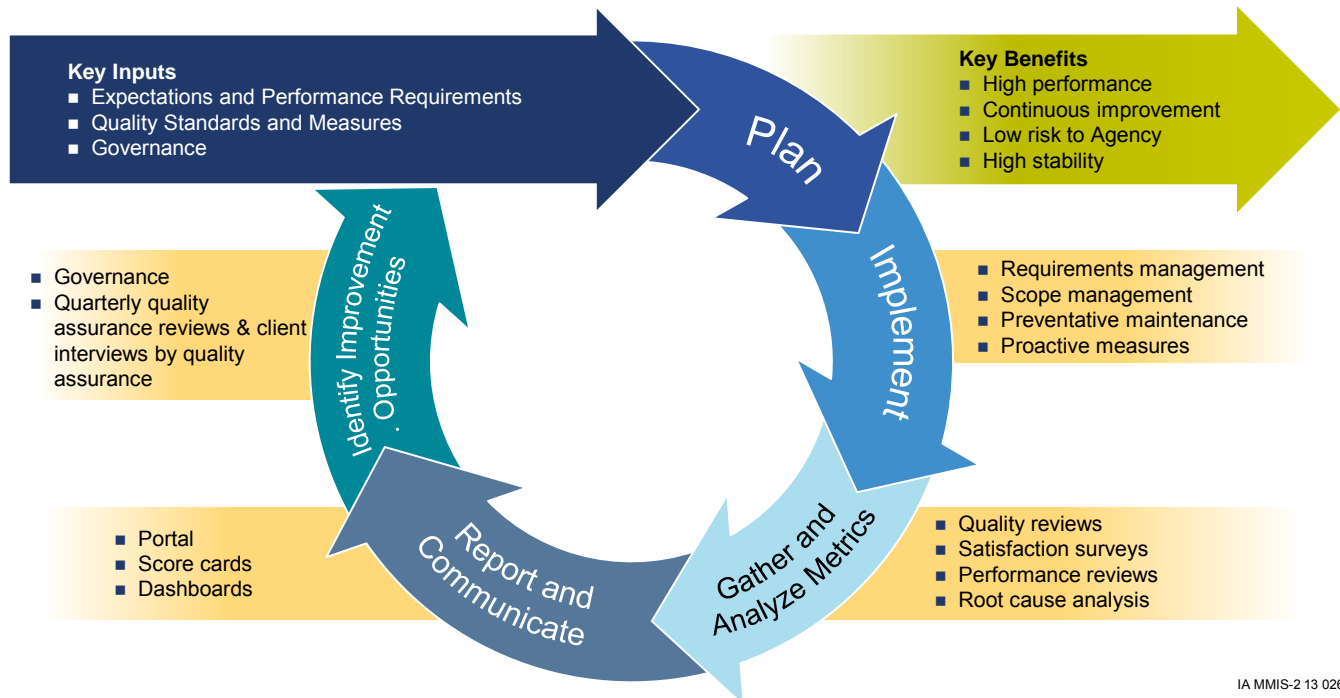
#### 4A.2.6.2 Agency Responsibilities (response not required per RFP 4.3.4.1)

#### 4A.2.6.3 Contractor Responsibilities

##### 2.2.6.3 Contractor Responsibilities

*The Contractor shall:*

- a. *Develop, maintain, and provide access to records required by the Agency, state and federal auditors.*
- b. *Provide reports necessary to show compliance with all performance standards and other contract*



IA MMIS-2 13 026

**Figure 4A-3. Our Quality Assurance process provides the Agency with a stable and consistently high-performing MMIS implementation.**

**Tab 4A: Approach to Project & General Responsibilities**

Project & General



requirements.

*c. Provide to the Agency reports regarding components Contractors' activities relating to the MMIS. The Contractor shall propose the content of these reports with the Agency.*

*d. Prepare and submit to the Agency requests for system changes and notices of system problems related to the Contractor's operational responsibilities.*

Required audits of the program are supported by developing, maintaining, and providing access to reports required by the Agency, State, and Federal auditors. The QA team provides support for fiscal/financial audits, the claims processing system, Informational Systems (previously known as EDP) and general audits. Monthly reports, or a frequency determined with the Agency, document compliance with agreed upon performance standards and other contractual requirements. A succinct executive summary shows a high-level overview of the month-end review of overall operational performance, key trends, key successes, and areas for potential operational improvements.

Project reporting is a clear and effective way to show the Agency how we are performing on every aspect of the project. In addition to weekly meetings on project status, our PMO submits weekly and monthly status reports to the Agency.

The Agency will receive consolidated status reports. These reports provide transparency into project activities and processes. Report content evolves over time as the project moves from Takeover, through ACD to ongoing Operations and adheres to a mutually agreed upon format for the status reports. Part of the status report will be a section detailing the components Contractors' activities as they relate to the MMIS. Collaboration with the Agency helps determine the precise information required before initiating activities with the component Contractors to obtain the information and include it within the report in the agreed-upon format. Based on our previous experience with similar reporting requirements, we believe the following content at a minimum would be relevant:

- Status of any significant task completed or started within the reporting period
- Brief description of any significant task completed, started or in progress within the reporting period
- Estimated completion date of any significant task begun or in progress during the reporting period
- Identification of responsible components Contractor and their designated point of contact for the task

In addition, issues or risks warranting immediate attention are documented in a written report of the item with recommendations, as appropriate, and share this information with the Agency.

In collaboration with the Agency, we document the purpose, scope, impact, priority, and category of a change. Additionally, we identify the materials, personnel, effort and the associated cost to complete and implement the change. This information is formally submitted as a change request for review and approval by the Agency. During ongoing operations, incident and problem management tickets trigger change requests (CRs) clearly relating configuration items (CIs) to the work carried out. CRs require CIs be included. Monthly audits are performed to confirm the process is enforced while quarterly inventory keep CIs current. APHP tracks and reports active change requests through a Change Request Dashboard.

*e. Prepare and submit for Agency approval suggestions for changes in operational procedures and implement the changes upon approval by the Agency.*

*f. Maintain operational procedure manuals and update the manuals when changes are made.*

Continual operational process improvement is part of Accenture's standard approach as defined in ADM and it is part of our CMMI Level 4 processes. We keep the documentation on operational processes current and available to the Agency and staff. When an area for possible change or process improvement is identified, the Agency will receive the details of the current process compared to the proposed improvement. This will include a comparison to gather feedback and update the recommended process changes. Once the Agency agrees with the process change, the Change Management Process defined in our project management plans, guides how to log the change, identify and implement documentation updates, plan and conduct training, and track to closure.

Operations supervisors and a dedicated trainer maintain the MMIS operational procedure manuals for the Agency and update as policy and process changes are identified (including process improvements). Operational procedure manuals are governed by our change management process.

The modified operational procedure manuals are provided to impacted teams and other supporting agencies and contractors for review and input. Maintaining procedural documentation that aligns with current system capabilities as well as operations procedures and processes is important. Our methodology for Analysis, Configuration, and Deployment includes tasks to verify project documentation. For example, as part of our





standard project methodology, our PMO verifies that system design documentation has been updated to reflect any approved changes identified during product configuration or test phases.

This helps to verify that our documentation is accurate and up to date prior to the IA MMIS go-live. We use the same change management process to manage documentation during operations. As part of the change management process, we identify the impacts of any recommended change. This includes changes to project, procedure and system documentation. After we have incorporated the input into the documents, the Quality Analyst reviews the final draft to make appropriate changes to the quality process and strategy. The changed document is signed off to be deployed as a new version of the manual in the production operating environment. Inherent in our change management process, the control, checks and balances of this methodology fosters a culture of transparency and collaboration to help avoid processing errors and improve quality delivered.

*g. Ensure that effective and efficient communication protocols and lines of communication are established and maintained both internally and with Agency staff. Ensure that no action shall be taken that has the appearance of or effect of reducing open communication and association between the Agency and contractor staff.*

*h. Meet regularly with Agency Executives, the MIDAS project director and IME to review account performance and resolve issues between the Contractor and the Agency.*

*i. Provide to the Agency progress reports on the Contractor's activity as requested by the Agency.*

Team leadership team

carry forward a culture of transparency and open communication across the project and with Agency staff. We will not take action that has the appearance or effect of reducing open communication and association between the Agency and our staff. As described in Section 4A.2.1, our approach begins with the open and inclusive governance model that the Agency implemented during the initial MIDAS project. Key internal stakeholder groups will be included in our project management activities to help facilitate communication, coordination, and decision making. This governance process remains in place through go-live and into operations so that communication and coordination continue smoothly and without interruption. We adjust models for operations to reflect the shift in priorities, responsibilities, and participation that occurs as a result of the transition to the new MMIS.

Project leadership meet with Agency Executives, the MIDAS project director and IME on a regular basis to discuss performance and resolve issues. serves as the primary interface at status meetings with the Agency to review account performance and to discuss any problems and resolve issues related to the contract, formally and casually. Formal meetings include governance and project status meetings. Informal, ad hoc, or casual meetings occur on various topics like project successes, issues, or risks.

We communicate and provide progress reports on project activity throughout the life of the project. During our implementation phases, our reporting focuses on status of the implementation effort to show progress against our plan. The data we report on is extracted from our project management toolset. We develop and review template status reports with the Agency to confirm expectations. With your input we tailor and finalize the format and content to provide reports, as outlined above in Section 4A.2.4.f.

*j. Meet all federal and state privacy and security requirements within the contractor's operation.*

Our security and privacy solution, discussed further in section 4B3.1.f. Security and Privacy, provides leading-practice capabilities that address State and federal privacy and security requirements and Medicaid-specific regulatory security requirements. It encompasses relevant security domains and is based on ISO 27002 and other leading practice standards. The phases of the security lifecycle are addressed from early requirements phases through deployment and continuing operations. Our solution addresses the critical security needs of Medicaid client private health information and Medicaid transactional claims data. This approach addresses data issues such as system resilience, so your data is resistant to tampering and intrusion. We include the latest HIPAA and data security policies and regulatory requirements.

*k. Work with the Agency to implement quality improvement procedures. The Contractor must understand the nature of and participate in quality improvement procedures that may occur in response to critical situations and shall assist in the planning and implementation of quality improvement procedures based on proactive improvement.*

*l. Monitor the quality and accuracy of the Contractor's own work.*

*m. Submit quarterly reports electronically or in hard copy of the quality assurance activities, findings, and corrective actions (if any) to the Agency.*

Collaboration with the Agency helps to implement quality improvement procedures based on proactive improvements rather than retroactive responses. Quality improvement procedures may occur in response to critical situations and, as appropriate, assist in the planning and implementation of quality improvement





procedures. Our goal for quality improvement is to identify potential operational risks or inefficiencies and implement solutions. To accomplish this goal, we build upon a variety of time-tested methods to achieve optimal results. Through quantitative measurement and our dedication to quality assurance, and continual workflow and process improvement, we meet the Agency's quality assurance requirements and goals. As part of our focus on quality service delivery, we integrate the following into our quality assurance procedures:

- Agency and Accenture executive reviews of service delivery performance
- Program reports, trends, root cause analysis and proposed corrective actions
- Continuous improvement, built on Lean Six Sigma, focused on cost reduction, sustainable efficiency increases, and enhanced customer satisfaction

A comprehensive approach to quality management helps instill quality into processes and deliverables and includes checkpoints to verify that project processes are followed and work meets expectations. Supported by the PMO, the Quality Manager in implementing the processes and standards defined in the Quality Management Plan. The Quality Management Plan identifies the stakeholders and key participants in the quality process and their respective roles and responsibilities. The plan supports our efforts to deliver a quality solution by outlining the approach and criteria for performing quality reviews at all project levels and defining the approach for verifying and validating quality of the new MMIS throughout the project lifecycle. Our Quality Management Plan describes and includes a schedule of quality management activities. Planned quality management activities for the MIDAS project include:

- |  |                               |
|--|-------------------------------|
| ■ Quality Training                                     | ■ Client Satisfaction Surveys |
| ■ Peer Reviews   | ■ Expectations Management     |
| ■ Verification and Validation Activities               | ■ Stage/Phase Reviews         |
| ■ Process and Product Quality Assurance (PPQA) Reviews | ■ Performance Management      |
| ■ Independent Quality Assurance (QA) Reviews           |                               |

The purpose of these quality activities is to verify that we provide business value, meet agreed expectations, and deliver quality products for the MIDAS project. Our PMO supports our Quality Manager in planning, facilitating, documenting, and analyzing quality activities. QA activities, findings, and corrective actions (if any) to the Agency will be submitted quarterly. Electronic copies of the reports are uploaded to SharePoint.

*n. Perform continuous workflow analysis to improve performance of contractor functions and report the results of the analysis to the Agency.*

*o. Provide the Agency with a description of any changes to the workflow for approval prior to implementation.*

Program staff proactively identify potential ways to improve performance and report analysis results. We build upon a variety of market-tested methods to seek to achieve optimal results. For example, periodic prior authorization (PA) workflow reviews develop deeper key metrics understanding such as key steps taking longer to process and the average number of PAs processing through the workflow step. Based on our analysis, we work with the Agency and the Medical Services contractor to adjust the PA workflow to improve performance. Prior to the full implementation of a workflow and/or process improvement, we submit the applicable artifacts and deliverables to the Agency for approval. This helps to ultimately make the Agency and IME more efficient.

*p. For any performance falling below an Agency-specified level, explain the problems and identify the corrective action to improve the rating.*

*i. Implement an Agency approved corrective action plan within the time frame negotiated with the Agency.*

*ii. Provide documentation to the Agency demonstrating that the corrective action is complete and meets Agency requirements.*

*iii. Meet the corrective action commitments within the agreed upon timeframe.*

*q. Provide a written response to the Agency via e-mail within two business days of receipt of e-mail on routine issues or questions and include descriptions of resolution to the issues or answers to the questions.*

*r. Provide a written response to the Agency via e-mail within one business day of receipt of e-mail on emergency requests as defined by the Agency.*

*s. Maintain Agency-approved documentation of the methodology used to measure and report completion of all requirements and attainment of all performance standards.*

Per the discussion in Section 4A.2.6.1, Performance Reporting and Quality Assurance, and as part of a quality management process, includes creating corrective action plans in response to situations in which deficiencies may arise or for opportunities to improve performance. For performance falling below Agency specified performance measures, a CAP explains the problem and identify the action to improve the rating. The QA team serves as the main point of contact to perform corrective actions as directed by the Agency. The QA team channels the corrective action request to the appropriate operations area. Agency-approved corrective action



plans will be implemented within the agreed upon timeframe. The QA Manager works with the Agency to verify that the resolution addresses requirements within the agreed upon period.

Agency email requests will be responded to within two business days regarding routine issues or questions. The emailed response includes descriptions of issue resolution or answers to questions. Often, we also follow up with a phone call or face-to-face visit or meeting to discuss the issue or question. For emergency email requests (as defined by the Agency) received from the Agency, we respond via email within one business day. As with routine issues, we follow up with the sender to discuss the resolution and help verify that the response met their needs. We agree to maintain Agency-approved documentation of the methodology used to measure and report completion of all requirements and attainment of all performance standards.

#### 4A.2.6.4 Performance Standards

##### 2.2.6.4 Performance Standards

*The Contractor shall:*

- a. Provide the monthly contract management reports within three business days of the end of the reporting period.*
- b. Provide monthly performance monitoring report within five business days of the end of the reporting period.*

The Agency will have direct visibility into daily, weekly, monthly, and annual operational data through program reporting. Our solution provides a central repository and reporting database to deliver accurate, up-to-date reporting of program status. In addition, this approach includes maintaining up-to-date program information such as risks, issues, action items, and defect tracking in TFS. This information is available to the Agency through built-in reporting capabilities of TFS. APHP and TFS tools help generate monthly contract management reports and performance monitoring reporting by extracting point-in-time data into a formal monthly contract management report. The Agency will receive monthly contract management reports within three business days of the end of the reporting period and the monthly performance monitoring reports within five business days of the end of the reporting period.

- c. Provide knowledge transfer on operational procedure changes to the applicable IME staff as a result of upgrades or other changes within two weeks of the upgrade.*
- d. Complete updates to all documentation related to modifications performed on the system as defined by the Agency.*
- e. Update operational procedure manuals within 10 business days of the implementation of a change.*

Knowledge transfer resources monitor operational and system changes as they are planned in order to keep manuals, training materials, and online guides up-to-date. When operational procedure changes occur, we update the appropriate manuals, user guides, and training materials. We then roll out those changes to IME staff within two weeks of an operational procedure change or upgrade. Operational procedure manuals are updated within 10 business days of the implementation of a change.

The knowledge transfer team is integrated into our operations team framework. Working as a unit in understanding helps the incorporation of operational procedure change and updating documents and manuals appropriately. Our approach to having a single, unified team helps account for changes in the documentation and manuals. As we work with the Agency to create a plan for updates to the operational system, we include knowledge transfer activities in that planning. Close coordination with the APHP product team improves understanding the changes in each new release and assess the updated materials such as manuals and training guides. The work plan for modifications to the new MMIS will include the timeline and approach to testing, knowledge transfer, and deployment. The Agency-confirmed plan and timeline sets the expectations for the combined team verifying that updates are completed as expected.

- f. Provide a response and resolution to the Agency unit manager team within two business days of receipt to requests made in any form (e.g., e-mail, phone) on routine issues or questions.*
- g. Provide a response within one business day to the Agency unit manager team on emergency requests, as defined by the Agency.*

As discussed in 4A.2.6.3 we will respond to the Agency unit manager team within two business days of receipt of request on routine issues or questions received. Emergency requests will receive a response within one business day. In addition to providing email responses, our operational managers often follow up with a call, visit or meeting on the issue.

#### 4A.2.6.5 Annual Performance Reporting

##### 2.2.6.5 Annual Performance Reporting

*The Contractor shall provide annual performance reporting no later than October 15 of each contract base and option year for the state fiscal year (SFY) that ended in the prior month of June. (Example: Provide data by*



October 15, 2014, for the state fiscal year that ended on June 30, 2014.) The contractor will present the required data in an Agency approved format and content for the following reported performance standards.

We work closely with the Agency to provide the annual performance report in the approved format required. We implement a schedule to generate draft reports, conduct walkthroughs and reviews and refine the reports into final formats based on Agency feedback. Collaboration with the Agency helps to identify metrics required and submit the report on or before the October 15 deadline on an annual basis for the state fiscal year.

## 4A.2.7 Staffing

### 2.2.7 Staffing

The Contractor shall provide the number of proposed staff by functional area.

Our Staffing Management Plan deliverables will provide the number of staff by functional area in both organizational chart and matrix form. An example of this organizational chart layout is shown in Figure 4A-4. The success of this project depends on dedicated and focused personnel throughout the life of the project. To that end, we carefully selected individuals who not only possess the requisite skills and experience to take over the

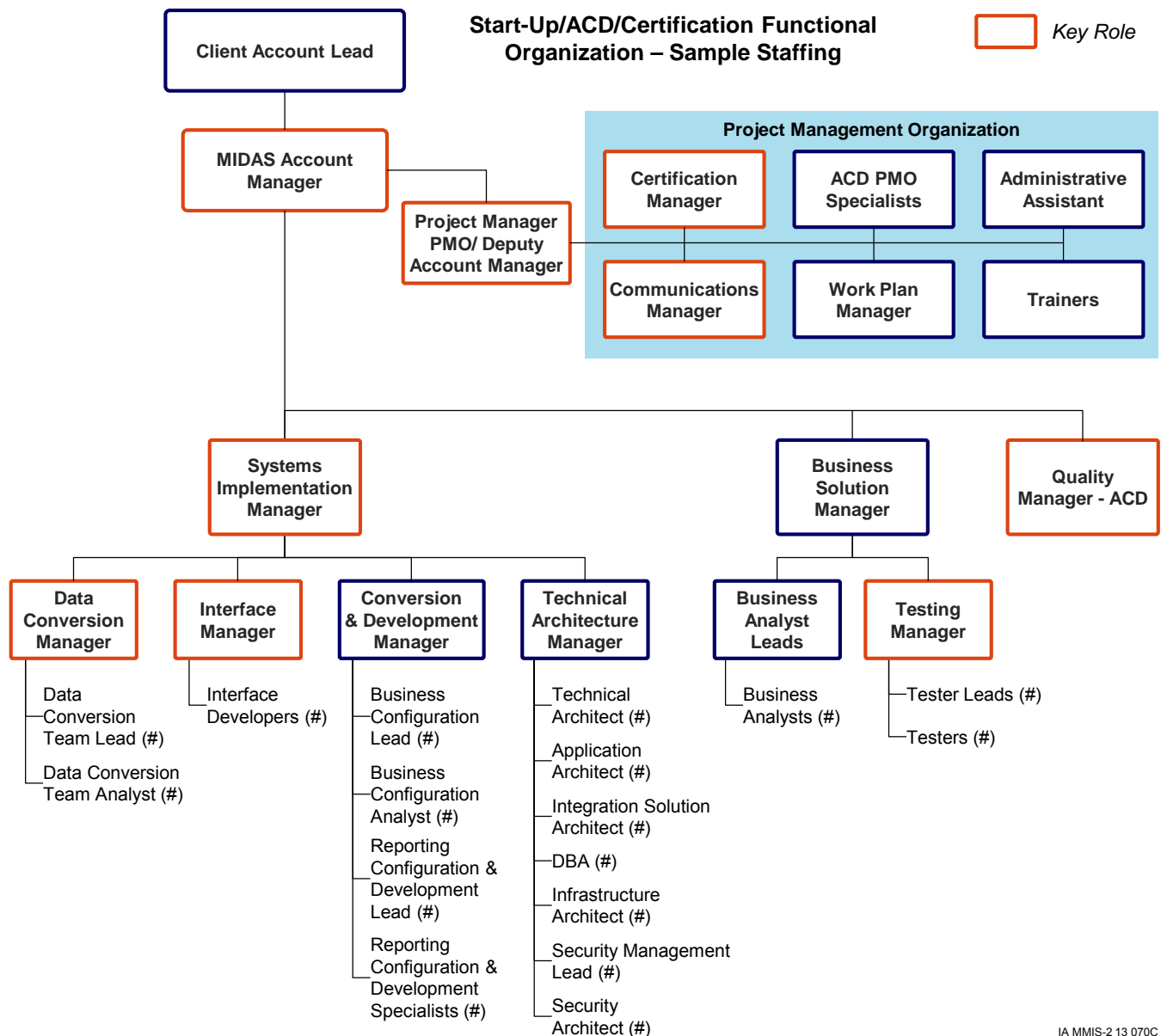


Figure 4A-4. The Agency receives the number of staff by functional area based on SOW tasks, our team's MIDAS project knowledge and identified staff who have Medicaid and APHP experience.



current MMIS, and administer the new MMIS, but also have personally expressed a strong commitment to the project. This includes personnel returning to the IME, such as the proposed MIDAS Account Manager, [REDACTED] Project Manager for the PMO, [REDACTED]; Business Solutions Manager, [REDACTED]; and Claims Operations Manager, [REDACTED]. The result of this approach is a dynamic team that serves and meets the needs of the Agency's Medicaid members, providers and other stakeholders.

#### 4A.2.7.1 Named Key Personnel

##### 2.2.7.1 Named Key Personnel

*Key personnel must be available for assignment for the MMIS contract on a full-time basis and must be solely dedicated to the MIDAS project. Each key personnel member must have the required experience*

Our key staff brings MIDAS expertise back to the IME to help with a seamless start to the project. They are available to the contract on a full-time basis and will be solely dedicated to the MIDAS project. We have vetted each candidate and our proposed key staff members each exceed the required experience listed in the RFP. Section 5.2.3.1, Project Manager and Key Personnel provides details on all key personnel.

#### 4A.2.7.2 Key Personnel Qualifications

##### 2.2.7.2 Key Personnel Qualifications

*The Contractor shall:*

*a. Employ both the MIDAS and Operations Account Managers, and the MIDAS the Account Manager and Project Manager for the Project Management Office (PMO) for the MMIS at the time of Bid Proposal submission.*

Our MIDAS Account Manager, [REDACTED], Operations Account Manager, [REDACTED] and Project Manager for the PMO, [REDACTED] are current Accenture employees. [REDACTED] and [REDACTED] served in the same roles on the first MIDAS contract and look forward to continuing their work in supporting the Agency.

*b. Employ all other key personnel or must have a commitment from them to join the Contractor's organization by the beginning of the Contract start date with the exception of the Turnover staff.*

Other key personnel, except for Turnover staff, will be employed or committed to join by the contract start date. Key Personnel leadership roles will be filled with talented people who have the requisite experience. Some of these individuals have first-hand experience with the Iowa Medicaid environment. We have made a point to seek out the most talented professionals to work with the Agency and undertake this complex and critically important project (please see Section 5.2.3.1.2, Key Personnel Qualifications).

*c. Commit key personnel named in the Bid Proposal to the MIDAS project from the start date identified in the table below for the start-up and implementation phases. The Contractor shall not reassign key personnel during this period, except in cases of resignation or termination from the Contractor's organization or in the case of the death of the named individual.*

*The following tables illustrate the qualifications, start date and any special requirements for key personnel who must be named. The bidder may substitute experience for a degree, however, the bidder must be able to justify how the experience substitutes for the required degree.*

**Table 2.1: Key Personnel for MIDAS**

| MIDAS KEY PERSONNEL             |   |                        |   |
|---------------------------------|---|------------------------|---|
| Key Person                      | Qualifications  | Start Date             | Special Requirements  |
| MIDAS Account Manager           | A minimum of five years of account management or senior supervisory experience for a government or private sector health care payor, including a minimum of three years of experience similar to the Contract scope of work.  | Contract signing date. | Must be 100 percent dedicated to the Iowa MIDAS project. Must be employed by bidder when proposal is submitted. |
| Systems Implementation Manager  | Require a minimum of five years of Medicaid-related system design and management experience including the management of one MMIS design and development project similar in size and scope to this project. Experience must involve project management of an enterprise-wide architecture, networking, multiple systems integration, hardware and software and managing a technical team and its activities from inception through post implementation on a minimum of one project of similar size and complexity to the MIDAS project. A Bachelor's Degree in Information System Engineering, Computer Science or a related field is also required. | Contract signing date. | Must be 100 percent dedicated to the MIDAS project.   |
| Project Manager for the Project | Require a minimum of three years (36 months) of project management experience including the management of at least one MMIS systems design and development project similar in   | Contract signing date. | Must be 100 percent dedicated to the Iowa MIDAS project. Must   |





|                           |   |                        |  |
|---------------------------|---|------------------------|--|
| Management Office (PMO)   | size and scope to this project that encompassed the full system development life cycle from initiation through post implementation. A minimum of two years of experience using Microsoft Project or like software.  |                        | be employed by bidder when proposal is submitted.        |
| Quality Assurance Manager | A Bachelor's Degree with at least three courses in statistics and or quality assurance and a minimum of three years progressive experience in the quality assurance function of a large scale claims processing organization or have at least five years progressive experience in the quality assurance function of a large scale claims processing organization. This position must report directly to the Account Manager. | Contract signing date. | Must be 100 percent dedicated to the Iowa MIDAS project. |
| Data Conversion Manager   | Requires a minimum of five years of experience managing data conversion for a MMIS or health care information systems. A Bachelor Degree in Information System Engineering or a related field.  | Contract signing date. | Must be 100 percent dedicated to the Iowa MIDAS project. |
| Interface Manager         | A minimum of four years of experience in systems integration, messaging modules and interface development. A Bachelor Degree in Information System Engineering or a related field.  | Contract signing date. | Must be 100 percent dedicated to the Iowa MIDAS project. |
| Testing Manager           | A minimum of four years of experience conducting system and user acceptance tests for a MMIS or major health payor system. A Bachelor's Degree in Business Management or a related field is also required.  | Contract signing date. | Must be 100 percent dedicated to the Iowa MIDAS project. |
| Communications Manager    | A minimum of three years of experience in communication or organization change management/ readiness within a health systems or other IT environment. A Bachelor's Degree in Business Management, Communications or related field is also required.   | Contract signing date. | Must be 100 percent dedicated to the Iowa MIDAS project. |
| Certification Manager     | A minimum of five years of Medicaid related system design. Strong management and communication skills, experience including the management of one MMIS systems implementation project similar in size and scope to this project. Experience certifying at least one MMIS.   | Contract signing date. | Must be 100 percent dedicated to the Iowa MIDAS project. |

**Table 2.2: Key Personnel for the MMIS Operations Phase**

| CORE MMIS OPERATIONS KEY PERSONNEL (Including takeover of Legacy MMIS) |   |                        |  |
|--|---|------------------------|--|
| Key Person   | Qualifications  | Start Date             | Special Requirements   |
| Account Manager  | A minimum of five years of account management or senior supervisory experience for a government or private sector health care payor, including a minimum of three years of experience in a state of equivalent scope to Iowa.   | Contract signing date. | Must be 100 percent dedicated to the Iowa Medicaid Enterprise. |
| Claims Operations Manager  | A Bachelor's Degree, or equivalent experience and a minimum of five years experience managing claims processing operations and personnel for a Medicaid fiscal agent or private sector health care payor, including a minimum of two years MMIS experience.   | Contract signing date. | Must be 100 percent dedicated to the Iowa Medicaid Enterprise. |
| Systems Manager  | A minimum of five years of MMIS operations experience as manager in a state of equivalent scope to Iowa. A Bachelor's Degree in Information System Engineering or Computer Science or a related field is also required. Equivalent experience may be substituted for the degree providing this manager is an active participant during the ACD phases.  | Contract signing date. | Must be 100 percent dedicated to the Iowa Medicaid Enterprise. |
| Quality Assurance Manager  | A Bachelor's Degree with at least three courses in Statistics and or Quality Assurance and a minimum of four years progressive experience in the quality assurance function of a large scale claims processing organization or at least five years progressive experience in the quality assurance function of a large scale claims processing organization. This position must report directly to the Account Manager. | Contract signing date. | Must be 100 percent dedicated to the Iowa Medicaid Enterprise. |

**Table 2.3: Key Personnel for the Turnover Phase**

| CORE MMIS PERSONNEL |                |            |                      |
|---------------------|----------------|------------|----------------------|
| Key Person          | Qualifications | Start Date | Special Requirements |





**Turnover  
Manager**

*A Bachelor's Degree and at least three years MMIS experience turning over operations similar in size and scope to Iowa. Turnover Manager must have sufficient delegation of management authority to make decisions and obligate Contractor resources to fulfill obligations of the Turnover Phase.*

*Six months  
prior to  
phase  
start date.*

*Must be 100 percent  
dedicated to the Iowa  
Medicaid project.*

Key personnel named in this proposal are available from the start dates identified in Tables 2.1 through 2.3 of the RFP (listed above). We agree to not reassign key personnel during this period, except in cases of resignation or termination or in the case of the death of the named individual. Key personnel have the qualifications necessary to perform their job role. For more information, see Section 5.2.3.1.2, Key Personnel Qualifications.

#### **2.2.7.2.1 Agency Approval of Key Personnel**

- The Agency reserves the right of prior approval for all named key personnel.*
- The Agency reserves the right to request the removal of key personnel at any time during the length of the contract for any reason.*
- The Agency also reserves the right of prior approval for any replacement of key personnel.*
- The Agency will provide the selected contractor 30 days to find a satisfactory replacement for the position except in cases of flagrant violation of state or federal law or contractual terms. Extensions may be requested in writing and approved by the Agency.*
- The Agency reserves the right to interview any and all candidates for named key positions.*

We understand the value of getting the right people in the right positions. In the spirit of working collaboratively and transparently with the Agency, we commit to requirements 2.2.7.2.1 a-e.

#### **2.2.7.2.2 Changes to Contractor's Key Personnel**

- The contractor shall not replace or alter the number and distribution of key personnel without prior written approval from the Agency.*
- Replacement for key personnel will have comparable knowledge transfer, experience, and ability to the person originally proposed for the position.*
  - Replacement personnel, whom the Project Director or Contract Owner have previously approved, must be in place performing their new functions before the departure of the key personnel they are replacing and for whom the Project Director or Contract Owner has provided written approval of their transfer or reassignment.*

In working openly with the Agency, we only replace or alter the number and distribution of key personnel after receiving written approval. We provide replacements for key personnel who have comparable knowledge transfer, experience, and ability to the person originally proposed for the position. We match required qualifications with our employees who have the right qualifications in our online employee database. Agency-approved replacement personnel will be in place performing the work before the key person being replaced departs. Before their departure, key personnel receive the Agency's Project Director or Contract Owner's approval for a transfer or reassignment.

In the event of an unplanned key personnel departure, an acting backup with equal or greater qualifications than the departing individual will be identified. Then, with concurrence of the Agency and without putting the project at risk, leadership would determine whether to keep the backup resource or look for a replacement.

- The Contractor shall provide the Project Director or Contract Owner with 15 business days' notice prior to any proposed transfer or replacement of any contractor's key personnel.*
- At the time of providing such notice, the Contractor shall also provide the Project Director or contract administration with the resumes and references of the proposed replacement key personnel.*
  - Upon request, the Project Director or Contract Owner will have an opportunity to meet and interview the proposed replacement key personnel in Des Moines, Iowa prior to approval of the key personnel replacement.*
  - The Project Director or Contract Owner may waive the 15 business day notice requirement when replacement is due to termination, death, or resignation of a key employee*

Before any key personnel's transfer or replacement, the Agency's Project Director or contract owner will receive 15 business days' notice. At the time of notice, we provide the Agency proposed replacement key personnel resumes and references. If requested, we provide the Agency an opportunity to meet and interview the proposed key personnel in Des Moines, Iowa before receiving Agency approval. We acknowledge the Agency may waive the 15 business day notice requirement when replacement of key personnel is due to termination, death, or resignation.

#### **2.2.7.2.3 Job Rotation and Key Personnel Coverage**

*The Contractor shall develop and maintain a plan for job rotation and conduct knowledge transfer to staff to ensure that all functions can be adequately performed during the absence of staff for vacation and other reasons.*



Our approach includes a plan for job rotation and knowledge transfer for our project staff to provide for coverage of functions in the event of vacation and other absences. The plan enables participants to broaden knowledge of other Project functions, facilitate knowledge transfer and support continuity of MMIS operations.

Elements of knowledge transfer are ongoing and consistently applied developmental activities. Knowledge transfer is accomplished through both formal and informal approaches. Formal training is delivered through scheduled project-wide knowledge transfer sessions to employee groups along with monitored tasks and job aids for the individual. Informal knowledge transfer is accomplished by a "learn by doing" through on-the-job training. For additional details on our Knowledge Transfer Plan, see 4B1.b.5 Knowledge Transfer Activities.

While the job rotation plan is project specific, it is not administered in isolation. Our staff has access to broad learning and development tools that are available organization-wide. Personalized learning options enable staff members to be closely involved in their own development. These options include learning roadmaps, which allow us to provide more personalized recommended curricula to find the right training, collaboration and job experience to build their specialized skills.

#### **2.2.7.2.4 Coverage for Key Personnel**

*The Contractor shall designate staff that is trained and able to perform the functions of key personnel when the primary staff member is absent for consecutive days.*

To keep day-to-day operations running smoothly, and the project running effectively, we designate staff members who are trained and able to perform the functions of sensitive positions when primary staff members are absent on consecutive days of vacation or extended leave. By definition, we consider all key personnel to be sensitive positions. Other sensitive positions are identified by key personnel for their respective functional areas and assigned a backup.

#### **2.2.7.2.5 Residency and Work Status**

*The Contractor shall follow all federal and state laws regarding Social Security registration and legal work status of all staff employed or contracted by the Contractor.*

We follow all federal and state laws regarding Social Security registration and legal work status of all employed or contracted staff. We use E-Verify to check eligibility of new hires in the US. E-Verify is an Internet-based system operated by the Department of Homeland Security in partnership with the Social Security Administration that electronically verifies the employment eligibility of new workers. It validates their information from Form I-9 (the paper employment eligibility verification form).

#### **2.2.7.2.6 Background Checks**

*All staff employed or contracted by the Contractor working on the MMIS shall have a criminal background check done prior to employment and periodically as required by the Agency, with results submitted to the Agency for review. The Contractor shall provide the Agency with their background check criteria or guidelines for Agency review and approval.*

Employment candidates must meet: Social Security verification; Social Security Trace; Verification of education; Criminal Felony and misdemeanor; Federal Criminal; Nationwide Background Search (from the HireRight database); Global Sanctions and Enforcement Check (GSEC); Employer reference. Our formal background check criteria will be provided to the Agency for review and approval.

#### **2.2.7.2.7 Bonding**

*The Contractor shall be bonded against loss or theft for all staff that handle or have access to checks in the contractor's performance of its functions.*

Staff members that handle or have access to checks are bonded against loss or theft.

#### **2.2.7.2.8 The Contractor shall obtain Agency approval of all subcontractor(s) and subcontractor(s) work locations.**

Our team includes one subcontractor with specific and relevant expertise for this project – S2 Tech. The completed Attachment C can be found in Tab 3, and details of the company in Tab 5, Section 5.1.5. We understand that Agency consent and approval of subcontractors is required before contract start of work and during the contract period and acknowledge that there is no contractual relationship for this project between our subcontractor and the Agency.

## **4A.2.8 User Access to System**

#### **2.2.8 User Access to System**

*The system shall be available 24 hours per day seven days per week 99.5% of the time. The Contractor shall not schedule maintenance or otherwise allow the system to be unavailable during hours outside of 7:00 p.m. to 6:00 a.m. Central Time (CT).*



*An application is considered unavailable when a user does not get the complete, correct full-screen response to an input transaction after depressing the “enter” key or another specified interface. The Contractor shall notify the Agency when it has determined the system is unavailable.*

*The Contractor shall establish a performance dashboard that will report to the selected service level indicators from the Agency applications to indicate availability of the selected application, plus an exception log identifying those applications that were not available during the reporting period. The Contractor shall also include in the dashboard, the calculation of user access availability in the report. The frequency, content, and methodology for the reports must be approved by the Agency. The Contractor shall be responsible for providing and maintaining all necessary telecommunications circuits between the Agency offices and the contractor's facilities.*

*Network response time shall be measured for all Agency business days between the hours of 7:00 a.m. to 6:00 p.m. Central Time. Contractor shall provide an automated means to measure and report network response time that meets the Agency requirements. The network response time is measured from the time the transaction is entered until all data is displayed on the screen or print process begins. Network response times are outlined in the performance standards.*

It is critical that the system be available to workers, providers, and members outside of standard business hours. A worker's access to information in realtime is key to shifting and adapting policy and operations to match the dynamics of the population. APHP will be available 24 hours a day, 7 days a week, with 99.5% availability. User access to the system is controlled and monitored by performing the tasks below:

- Configure and deploy a new MMIS whose redundant nature provides for 99.5% uptime with respect to the components within our boundary. In addition, to minimize user disruptions, we only schedule routine maintenance during the hours of 7:00 pm – 6:00 am CT.
- Inform the Agency of any downtime within the systems that we manage that may affect a user's ability to perform their responsibilities. We will work with the Agency to identify the proper threshold (number of users that cannot access the system) and how long an outage must last before we are required to inform the Agency of an outage.
- Our Security Information and Event Management (SIEM) and Network Monitoring System will monitor the health of our system and will report when high and critical risks exist within the environment and when the system becomes unavailable. The dashboard on both systems will provide the Agency with the ability to monitor application uptimes and availability of the user access authentication system.
- Monitor network response times within our environment, with policy and rigor that is in line with how network response times are measured within the industry.

## 4A.2.9 Documentation

### 2.2.9 Documentation

The repository is a comprehensive repository for documents and other materials related to the project. Changes to documents in the repository will occur in accordance with the change and document management process, which include action to: establish and communicate a standard directory structure; establish and monitor document naming conventions and standards; capture and report on standard document elements, such as version number, author, change history and rationale, participants in document creation, and approvals.

#### 4A.2.9.1 General Documentation

##### 2.2.9.1 General Documentation

*The Contractor shall:*

*a. Create and update operational procedure manuals in the Agency-prescribed format within 10 business days of the implementation of a change.*

When changes are made to the new MMIS, assigned staff track and manage them in accordance with our change management process. As changes are made and accepted by the Agency, they either create or update our operational procedure manuals within 10 days of the implementation of the change. We develop the new or modified procedure manuals in the State-prescribed format and upload them into SharePoint and TFS, and make them available to users. TFS is necessary for documents that need strict configuration management but are too cumbersome to use for other documents. A notification is selected to notify users of the documentation availability.

*b. Identify deficiencies and provide the Agency with a corrective action plan through the internal quality control reviews within ten business days of discovery of a problem found.*

Our Quality Assurance team audits the General Documentation to validate that the documentation is current, accurate and reflects the current platform and COTS products, and meets the current contractual requirements. Once the audit is complete, we submit an assessment report to the Agency for review and



approval. For any deficiencies, within 10 business days of the discovery, we submit a Corrective Action Plan to the Agency. Once the Corrective Action Plan is reviewed a Plan of Action and Milestones (POAM) is created to track deficiencies and corrective actions. The POAMs will be reviewed at least monthly to confirm timely implementation of corrective actions.

*c. Maintain the Agency-approved documentation of the methodology used to measure and report on all completed Contract requirements and all performance standards. State the sources of the data and include enough detail to enable the Agency staff or others to validate the stated results.*

A standard part of our planning and mobilization methodology is to document the format, process, and content we use for status and performance reporting. In the prior MIDAS project, we developed the weekly reporting format, documented the process, the data sources and data being used, and the calculations used to assess status. We prepared a presentation on our approach and walked through it with the Agency. Based on feedback from the Agency and SMT, QA/QC, POMI, and IV&V teams, we made adjustments and finalized the standard reporting. The same, collaborative process is followed during the new MIDAS project beginning with Start-Up/Takeover and continuing through each phase of the project.

*d. Designate a trainer who will train the professional services contractors' staff.*

Professional services contractors' staff will be trained by a designated trainer. This trainer will coordinate with the Agency and other professional services contractors to determine the type of training needed, its priority, and appropriate training dates.

*e. Maintain and update the system design documentation, user manuals, and data dictionaries for all applications, products, and systems.*

Maintaining system documentation that aligns with current system capabilities will be important to consistency and transparency within the IME. Our methodology for ACD includes tasks after certain project tasks to verify project documentation. For example, as part of our standard methodology, the PMO verifies that system design documentation has been updated to reflect approved changes identified during configuration or test phases. This helps to verify that our documentation is accurate and up-to-date prior to the IA MMIS go live. As part of the change management process, we identify the impacts of any proposed change, including changes to project and system documentation. See 4A.2.4 General Contractor Responsibilities for more information.

The check-in and check-out features of the MMIS Repository provide version control on all documentation. Additionally, standard features of TFS for secure version management and auditing promote the efficient management of documents and validate that they contain up-to-date material. Access-control features limit the editing and revision to only authorized individuals.

#### 4A.2.9.2 Operational Procedures Documentation

##### 2.2.9.2 Operational Procedures Documentation

*The Contractor shall:*

*a. Maintain operational procedures in the Agency-prescribed format documenting the processes and procedures used in the performance of their IME functions.*

*b. Document all changes within 10 business days of the change in the format as defined by the Agency. The contractor will provide to the Agency updated documentation within 10 business days of the date changes are installed before the Agency provides a signoff of the task.*

*c. Use version control to identify current documentation.*

*d. Provide all documentation in electronic form and make all documentation available online.*

*e. Maintain standard naming conventions in the documentation. The Contractor shall not reference the Contractor's corporate name in any of the documentation.*

IME operational procedures are created and maintained to be detailed, clear and complete for the new MMIS and provide the processes and procedures used to perform our contracted functions. Operational procedure documentation will be consistent with Agency-prescribed format. To remain in sync with the Agency's documentation format, we document changes in 10 business days of the change in the format defined by the Agency. This is a prerequisite to the Agency signing off on a task.

Version control identifies current documentation. Iowa uses Microsoft products and we use SharePoint to provide tightly controlled versioning of documents. The check-in and check-out features of the SharePoint repository provide version control on all documentation. Current versions are made available in document repository, with historical versions also available to users. The repository stores documentation in electronic form and made available online. Version control is used for documentation including operational procedures documentation in electronic form and make it available online. Additionally, we provide documentation for





external use, such as provider manuals, online help, program materials, procedure updates and EDI billing instructions in electronic form and web-published.

Our use of the SharePoint repository provides individuals with confidence that they are accessing the most up-to-date electronic documentation available online. As part of defining our document management processes, during the ACD Phase we work in collaboration with the Agency to develop standard naming conventions for all documentation. Once agreed upon with the Agency, we maintain the standard naming convention for the MMIS documentation. We will not reference our corporate name in any of the documentation.

## 4A.2.10 Knowledge Transfer

### 2.2.10 Knowledge Transfer

#### *The Contractor shall:*

#### *a. Provide all Contractor staff with appropriate knowledge transfer in the system functions that they will use.*

Knowledge transfer objectives include training staff to effectively interact with the IME and perform their jobs. Training programs provide each staff member with a comprehensive understanding of the systematic IME functions based on their job needs and present it in a relevant, creative, and dynamic fashion that enables a smooth transfer of information. The APHP base product training material is MITA-aligned and includes a role-based curriculum matrix with a recommended list of courses based on a resource's role. In addition to provider and member-facing training, the base curriculum contains material addressing system functionality that supports MITA business functions including Claims Processing, Prior Authorization, Eligibility and Enrollment, Member Management, Care Management, Provider Management, Financial Management, Performance Management, Plan Management, Operations Management, and Business Relationship Management.

The training methodology, discussed further in 4B.1.b.5 Knowledge Transfer Activities, builds a comprehensive approach that encompasses communication, blended learning delivery, field support models and readiness/adoption, which allows MIDAS users to have a clear sense of how the new system implementation will affect their roles and will be prepared to begin using the system upon implementation. We have provided sample training material in the **Technical Specifications Supporting Information, Sample APHP Provider Function Training** folder of the electronic submittal. To launch the sample interactive training, double-click the **LAUNCH TRAINING** file from any computer with a standard web browser.

#### *b. Conduct MMIS business, technical, and workflow process management knowledge transfer.*

*c. The Agency will arrange contact management (call center) and tracking system of knowledge transfer for the Contractor staff who interface with these systems. Likewise, the Agency will provide DS/DW system knowledge transfer to the Contractor staff who will use the system.*

*d. Designate a trainer who will train the Pharmacy Point-of-Sale (POS) system services contractor's staff, Professional Services contractor's staff and Agency staff as determined by the Agency.*

*e. Provide initial and ongoing knowledge transfer to its staff in its operational procedures. The knowledge transfer will occur when:*

- 1. New staff or replacement staff is hired.*
- 2. New policies or procedures are implemented.*
- 3. Changes to policies or procedures are implemented.*

Base product training material will include an overview on the new MMIS and detailed information on specific system functions. During Configuration activities, the knowledge transfer team develops the knowledge transfer materials, online help, online tutorials, and job aids, in a manner that is clear and understandable to the respective audiences. The team works with the Agency to develop materials that reflect realistic scenarios based on Agency standard business processes and procedures, tailored to the MMIS. The knowledge transfer team works in collaboration with other MMIS teams to create the knowledge transfer environment and data based on the approved designs. This phase requires coordination with multiple teams. For example, we work with the Technical Team to create the training environments, establish the procedures for refreshing the database after knowledge transfer sessions, and establish technical support plans for online tutorials.

Project staff participate in the Agency led training and knowledge transfer. We will train the POS contractor's staff, Professional Services contractor's staff and Agency staff on APHP. Train-the-trainer using trusted subject matter experts (SMEs) in the organization, who will then serve as points of contact after go-live for unit-level questions is the recommended approach.

Keeping Agency and IME contractor staff educated and current with the processes and procedures for using the MMIS is integral to achieving and maintaining the level of quality that the provider and member communities expect. Our comprehensive approach to knowledge transfer focuses on role-based business processes, the knowledge and skills of Agency, IME contractors, and our staff. As processes, systems, and staff





change over time, our ongoing continuous learning methods provide for access to instructor-led training, job aids, computer based training, and updated processing manuals for a consistent delivery of quality services for the IME providers and members. To help expedite knowledge transfer and offset transition risks associated with new staff, our operation solution is focused on rebadging existing staff familiar with IME policies that support today's IME core business process, and teaming with organizations that support the core operation.

Rebadging existing staff provides the IME with familiarity and security with transition risk avoidance and provides our operation with tenured staff that understands IME policies and the landscape of the IME multi-contractor environment. The result is retaining the intellectual knowledge and experience that the IME has developed over the years. For this reason, we use proven transition techniques to retain incumbent staff. Historically, 98 percent of incumbents choose to join Accenture and 95 percent remain with us after two years, demonstrating why we are routinely named by industry analysts as a Great Place to Work.

Our knowledge transfer approach for operations builds on the solid foundation and framework established during implementation and transition. This includes development of knowledge transfer plans, processes, tools, materials and existing skills. In Operations, our dedicated trainer works with our Quality Assurance Manager, our Claims Operations Team, the Agency, and IME professional services contractors to assess changes to systems, operational processes, and staff that trigger knowledge transfer events. Our trainer assesses knowledge transfer needs based on these changes and collaborates with our Claims Operations Team, the Agency, and IME professional services contractors to facilitate knowledge transfer to address knowledge and skill gaps and needs. Throughout Operations, we continue to refine our approach to address new and changing knowledge transfer needs and promote a greater understanding of systems, functions, processes, and other system aspects.

#### 4A.2.11 Security and Confidentiality

##### 2.2.11 Security and Confidentiality

*a. When not occupying Agency space, the Contractor shall provide physical site and data security sufficient to safeguard the operation and integrity of the IME. The Contractor shall comply with the Federal Information Processing Standards (FIPS) outlined in the following publications, as they apply to the specific contractor's work:*

- 1. Automatic Data Processing Physical Security and Risk Management (FIPS Publication (PUB).31).*
- 2. Computer Security Guidelines for Implementing the Privacy Act of 1974 (FIPS PUB.41).*

Security is a fundamental building block within the MIDAS project framework. It provides the Agency with security controls for protecting IT information and safeguarding Medicaid operations. Our security solution helps protect information, critical infrastructures, and key business processes.

The security and confidentiality solution provides leading-practice capabilities that meet the explicit RFP requirements and support compliance with applicable State and Federal security requirements and Medicaid-specific regulatory security requirements. When not occupying Agency space, we will provide physical site and data security sufficient to safeguard the operation and integrity of the IME. We employ more than 2,200 highly skilled security professionals that serve engagements in 26 nations and 25 states. These individuals protect the confidentiality and integrity of sensitive client data against the substantial risk of data breaches and unauthorized access. Background and data security experience helps to protect the integrity of the new MMIS.

The solution encompasses relevant security domains and is based on ISO 27002 and other leading practice standards. A global certification strategy is followed that sets corporate direction for standards identified as being particularly critical for project facility space and data security, including FIPS PUB 31 and 41, Capability Maturity Model® Integration for Development (CMMI®-DEV), ISO® 9001, eSourcing Capability Model for Service Providers (eSCM-SP), Lean Six Sigma, Information Technology Infrastructure Library (ITIL®), ISO 27001, ISO 14001, and SAS 70.

Our Global Delivery Centers have the following certifications: People Capability Maturity Model (People CMM®) Level 5; Capability Maturity Model Integration (CMMI®) Level 5—certified for IT Application Development and Application Management; ISO® 27001; ISO® 14001 and OHSAS 18001; ISO® 20000; and SAS 70. The associated controls are constantly monitored for compliance and undergo frequent recertification. As all systems are located within Agency owned data facilities and will be managed remotely, we will maintain systems to comply with FIPS standards using our compliance monitoring suite.

*b. In all locations, the Contractor shall safeguard data and records from alteration, loss, theft, destruction, or breach of confidentiality in accordance with both state and federal statutes and regulations, including but not limited to Health Insurance Portability and Accountability Act (HIPAA) requirements. All activity covered by this Scope of Work must be fully secured and protected.*



We safeguard information from alteration, loss, theft, destruction, or breach of confidentiality in accordance with both state and federal statutes and regulations, including but not limited to HIPAA requirements. We also control data and records in accordance with our policies for data privacy. Network communications between the State data center and co-located project facility is via secure network configuration, per Information Technology Enterprise (ITE) technical remote access protocols. Activity covered by this SOW is fully secured and protected. For example, routine reporting and auditing will verify mailed correspondence is handled securely, accurately and efficiently.

The project team works closely with the Agency to review data we will be exposed to and how the Agency would like for us to handle the data. We implement controls to provide security in handling client data, and to implement any client-specified rule sets, policies or compliance measures. These controls include:

- Allocation of a senior-level person with responsibility for client data protection
- Clear documentation and communication of Agency requirements to all staff with access to client data, including third-party contractors
- Data protection training for all project staff
- Procedures for managing security incidents
- Standards for secure transmission, storage, backup and destruction of data
- Technical, organizational and physical security controls, including hard drive encryption for laptops and other removable media, physical and logical access controls and employee background checks
- Reinforced safeguards by periodic audits of our project team to confirm compliance with Agency instructions and data privacy policies

Holistic security practices are important and recommend to our clients so take a defense-in-depth approach based on an overarching security framework that can address the spectrum of security concerns for IME as a whole. Recognizing this, the security solution to manage risk and bolster MIDAS MMIS security, with the expectation that the Agency has a holistic security framework in place to address its security needs around and beyond MMIS. As noted in Section 4C.22, Technical Operations, we plan to leverage the State Data Center and the State Hosting Department to maximize reuse and leverage investments that already exist.

In keeping with the above principle, our solution factors in the following security components specific to the planned MIDAS MMIS:

- Security Information and Event Monitoring (SIEM) through Event Tracker/ArcSight, that this is existing technology already being used by the Agency for the ELIAS system. We are extending its use into the MMIS environment
- Intrusion Detection Systems and Intrusion Prevention Systems (IDS/IPS) monitoring leveraging ITE-provided services
- Service Monitoring leveraging ITE provide Nagios and other monitoring set as well extending the monitoring toolset applied for ELIAS
- Access controls leveraging the APHP platform built-in IAM solution (Microsoft Forefront Identity Manager and Active Directory Federation Service) in integration with the Iowa Authentication and Authorization service
- Encryption for all MMIS sensitive data at rest through MS SQL Server Transparent Database Encryption (TDE)
- Database security controls and Audit Vault
- Vulnerability Testing leveraging ITE services and remediating findings before each major release of our MMIS solution

As part of the service level agreement we will complete with the State Hosting Department (as required in RFP 2.7.2.22), coordination of enterprise security services will occur to standardize the solution by applying available tools and common policies and procedures. We will collaborate with ITE and Agency security teams on security functions that exist today to provide a complete, compliant and effective security solution. These security functions include:

- Network Infrastructure security, since the Agency is providing the hosting services, and infrastructure security is applicable to all infrastructure components
- Data Loss Prevention (DLP), because data leakage needs to be monitored enterprise-wide, not just within MMIS (the in-scope security components provide a number of compensating controls for DLP)
- Ongoing Vulnerability Testing and Security Risk Assessments
- Operational and Management controls from NIST 800-53



*c. The Contractor shall implement safeguards designed to assure the integrity of system hardware, software, records and files, which include:*

Stringent safeguards are maintained to protect the integrity of system hardware, software, records, and files associated with the new MMIS and infrastructure. All new employees are required to complete security awareness training to orient them with our security policies, procedures and hierarchical contact reporting structure for suspected security infractions that may damage data integrity. Table 4A-3 highlights the benefits of our approach to safeguarding the Agency's IT assets.

**Table 4A-3. The Agency receives an environment of awareness, quick situation identification, fast containment and quick resolution through our established security and control procedures**

| Requirement   | Action/Benefit  |
|---|---|
| <i>1. Orienting new employees to security policies and procedures.</i>                                  | <ul style="list-style-type: none"> <li>Have implemented a comprehensive, on-going training and communications plan for all employees</li> <li>New employees receive training on security policies and procedures during orientation</li> <li>Helps prevent an unintentional breach by knowing the policies and procedures</li> <li>Attunes employees to understand how to identify a potential situation and how to report a suspected situation.</li> </ul>  |
| <i>2. Conducting periodic review sessions on security procedures.</i>                                   | <ul style="list-style-type: none"> <li>Schedule periodic review sessions on security procedures.</li> <li>Reiterates the importance that we are all part of the safety and security process</li> <li>Facilitates the introduction of new materials.</li> <li>Keeps safeguard measures in our forefront so we maintain our heightened awareness.</li> </ul>  |
| <i>3. Developing lists of personnel to be contacted in the event of a security breach.</i>              | <ul style="list-style-type: none"> <li>Maintain a 24-hour security hotline to report actual or suspected security incident</li> <li>If an incident is identified as having resulted in a reportable security breach, affected business teams work with legal and internal communications teams to report the incident promptly to the client and coordinate further investigative activities</li> <li>Established hierarchical organization of accountability</li> <li>Personnel know who to report potential situations to for quick resolution</li> </ul>         |
| <i>4. Maintaining entry logs for limited access areas.</i>  | <ul style="list-style-type: none"> <li>Building security systems maintain a log of entry/exit to limited access areas</li> <li>Tight control, monitoring, escalation.</li> <li>Quickly isolate reviews to finite spectrum.</li> </ul>   |
| <i>5. Maintaining an inventory of Agency-controlled IME assets, not including any financial assets.</i> | <ul style="list-style-type: none"> <li>An inventory of all assets, not including financial assets, is maintained and kept up to date.</li> <li>Secure storage and easy retrieval of artifacts generated on project</li> <li>Strong foundation for artifact storage and retrieval that support integrity of materials and services.</li> <li>Configuration management and versioning supports the integrity of current information.</li> </ul>   |
| <i>6. Limiting physical access to systems hardware, software, and libraries.</i>                        | <ul style="list-style-type: none"> <li>Vigorous controls that identify who has access, when the asset is accessed, and when the person releases access facilitates secure identification.</li> <li>Use of automated secure entries that require security identity recognition provides that only the authorized person has access.</li> <li>Facilities that are physically secured through multilayer barriers such as internal walls, no windows, solid doors and progressive identity recognition establish a multilayer realm of security protection.</li> </ul> |
| <i>7. Maintaining confidential and critical materials in limited access, secured areas.</i>             | <ul style="list-style-type: none"> <li>Our policies and procedures are designed to only allow authorized personnel access to restricted areas using multiple layers of access control such as smart badges and user authentication.</li> <li>Secure backup storage and transport establishes accountability for media management that has access, where the material is, and what time the material was transferred.</li> <li>Active management of facility areas and logical storage help prevent compromise of secure materials.</li> </ul>                       |

*d. The Agency will have the right to establish backup security for data and to keep backup data files in its possession.*



As the owners of the data, the Agency has the right to establish backup security and keep backup files. We recommend that backups be stored in an encrypted manner and offsite. Encryption provides protection for confidential data such as PHI and financial information in the event the backup media is lost.

#### 4A.2.11.1 Security Staff

##### 2.2.11.1 Security Staff

*The Contractor shall operate a systems security unit under direct management control. The Contractor shall separate duties of staff responsible for network connections, routing, firewall management, intrusion detection, email service, user authentication and verification, password management, and physical access control to ensure appropriate administrative, physical, and technical controls are in place. At a minimum, the Contractor must implement and maintain the security and privacy standards required by this Scope of Work.*

To mitigate risk, teams include systems security staff under direct management control. Organizationally, separate duties are required of staff responsible for network connections, routing, firewall, management, intrusion detection, email service, user authentication and verification, password management and physical access control. This structure minimizes risks to and helps to confirm that the appropriate administrative, physical and technical controls are in place and well defined. We implement and maintain the necessary security and privacy standards required by the SOW.

The security team has also implementing the security and compliance requirements for the integrated eligibility system, ELIAS, and has an established working relationship with both DHS and ITE security teams. We have worked collaboratively to successfully deliver the CMS compliance requirements through the system security plan and secured the Authority to Connect (ATC) as well as IRS approval to consume Federal Tax Information FTI. The security team members for the MIDAS project will be augmented by the current team in Iowa, leveraging their experience with DHS and ITE.

A focused security team will provide support during the start-up, ACD, certification and operations phases. As shown in the Start-up/ACD/Certification organizational chart shown in Section 4A.2.7, Staffing, our security leads report to the Technical Architecture Manager, who reports to the System Implementation Manager. Table 4A-4 shows the security roles we deploy during the Start-up, ACD, and Certification phases. For operations support, we provide managed security for ongoing support and maintenance of the security functions listed.

**Table 4A-4. Our security practitioners are experienced across a broad set of technologies and have delivered highly complex security solutions for many clients**

| Role                     | Duties   |
|--------------------------|--|
| Security Management Lead | <ul style="list-style-type: none"><li>Responsible for the assessment, planning and implementation of all security standards, practices and components required for the new MMIS</li><li>Responsible for adhering to DHS/ITE security standards, communications with DHS Information Security Officer, complying with CMS, HIPAA requirements, FISMA and IRS Federal Tax Information Pub 1075 standards, and others as listed in RFP 2.2.11.2</li></ul> |
| Security Architect       | <ul style="list-style-type: none"><li>Responsible for the security architecture and review of security deliverables/artifacts</li><li>Well versed in different security technologies proposed for the MMIS solution and apply that knowledge to the security architecture</li></ul>  |
| IAM Specialist           | <ul style="list-style-type: none"><li>Responsible for analysis, design and implementation of identity and access management functions (authentication, authorization, role based access control) leveraging proposed technology set</li><li>Work closely with DHS/ITE teams on integration with enterprise security functions for IAM</li></ul>  |
| SIEM Specialist          | <ul style="list-style-type: none"><li>Responsible for Analysis, Design and Implementation of Security Information and Event Management functions (Audit Logging and Monitoring)</li><li>Work closely with DHS/ITE teams on integration with enterprise security functions for audit, logging and monitoring</li></ul>  |
| Compliance Specialist    | <ul style="list-style-type: none"><li>Responsible for security compliance with regulatory standards and policies (CMS, IRS Pub 1075 and HIPAA, State regulations, DHS/ITE policies and procedures)</li><li>Delivery of System Security Plan package for CMS certification</li></ul>  |





## 4A.2.11.2 Additional Security Requirements

### 2.2.11.2 Additional Security Requirements

The Contractor shall comply fully with all security policies and procedures of the Agency, as well as with all applicable State and Federal requirements, in performance of this Contract. The Contractor shall not, without written authorization from the Agency, divulge to third parties any confidential information obtained by the Contractor or its agents, distributors, resellers, subcontractors, officers or employees in the course of performing Contract work. This information includes, but is not limited to, security procedures, business operations information, or commercial proprietary information in the possession of the Agency, Protected Health Information (PHI) or other data.

Contractor shall, at a minimum, comply with the following security and privacy requirements/standards:

Implement information security controls will include policies, practices, procedures and organizational structures to protect the confidentiality, integrity and availability of data and confidential information. This includes responsibility to keep client data secure and we work with our clients to help them comply with their obligations under data privacy laws. Accenture personnel are bound by the Code of Business Ethics, which contains the organization's commitments to and compliance with key legal, policy and ethical principles, including the protection of personal data and individuals' privacy in relation to such data. Table 4A-5 shows that we meet the additional security and privacy requirements/standards in RFP 2.2.11.2.1 through 2.2.11.2.27.

**Table 4A-5. Our solution meets the additional security requirements of the Agency through both our APHP product and our organizational security policies**

| Requirement  | Agree to Meet | Comment  |
|--|---------------|--|
| 2.2.11.2.1 Iowa Code 715C  | Yes           | An incident response team promptly notifies the Agency. This allows the Agency to begin its customer notification process regarding potential breach and possible loss of personally identifiable information and/or personal health information.  |
| 2.2.11.2.2 State of Iowa Enterprise Information Security Standards <a href="http://das.ite.iowa.gov/standards/enterprise_it/index.html">http://das.ite.iowa.gov/standards/enterprise_it/index.html</a> | Yes           | Personnel abide by all points of this standard to provide levels of confidentiality, integrity and availability in accordance with regulations, Agency security programs, and service agreements.  |
| 2.2.11.2.3 Statement on Auditing Standards (SAS) Type II   | Yes           | In the event we host Agency systems in our data centers, we provide this statement or an SSAE16. Currently, we do not anticipate placing any in-scope system outside of Agency-owned data centers.   |
| 2.2.11.2.4 IRS Publication 1075 Tax Information Security Guidelines for Federal, State, and Local Agencies   | Yes           | The solution complies with IRS Publication 1075 to protect Federal tax return and return information (FTI). We do this through Identity & Access Management and a Security Incident & Event Management system in APHP, including encryption, continuous audit and logging functionality, and a least-privilege model to safeguard data.  |
| 2.2.11.2.5 Federal Information Security Management Act (FISMA) of 2002   | Yes           | APHP data exchange capabilities are fully compliant with federal, state and IME security standards, including FISMA, NIST and HIPAA. Personnel use the following tools to validate compliance against FISMA and other in-scope regulatory requirements. <ul style="list-style-type: none"> <li>Qualys Policy Compliance (PC)</li> <li>Tripwire for Critical Servers</li> <li>Imperva SecureSphere</li> </ul> |
| 2.2.11.2.6 Clinger-Cohen Act of 1996 also known as the —Information Technology Management Reform Act of 1996   | Yes           | Team members follow all directives, where applicable, for acquisition, use and disposal of IT equipment.   |
| 2.2.11.2.7 Health Insurance Portability and Accountability Act (HIPAA) of 1996 (P.L.104-191): 45 CFR Part 160, 45 CFR Part 162, and 45 CFR Part 164 and the Privacy Act of 1974                        | Yes           | Our security methodology provides a framework for designing and implementing systems that addresses access controls, logging and monitoring of EPHI data, and encryption of data at rest and in transit. APHP employs secure data transfer protocols, including the secure sockets layer (SSL) protocol and public key authentication, signing and encryption.   |





| Requirement   | Agree to Meet | Comment  |
|---|---------------|--|
| <i>2.2.11.2.8 Health Information Technology for Economic and Clinical Health Act (HITECH Act); Enacted under ARA (Pub. 111-5)</i>   | Yes           | As a product specifically designed to support public health care, the APHP architecture and our security policy and procedures meet those required by the HITECH act.  |
| <i>2.2.11.2.9 PHI 45CFR 160.103 and Section 13400 of Subtitle D (Privacy) of the HITECH Act provisions of ARRA of 2009</i>  | Yes           | In the event of a security breach affecting 500 or more individuals, our incident response team will immediately notify the proper Agency group, as identified in the contact list, for the Agency to begin the customer notification of the breach and possible loss of personally identifiable information and/or personal health information. |
| <i>2.2.11.2.10 Homeland Security Presidential Directive (HSPD-12), —Policy for a Common Identification Standard for Federal Employees and Contractors, August 27, 2004</i>                                | Yes           | Project team members are required to wear smartcard badges. These are issued by the State based on identification verification, and are role based. This allows only authorized personnel, dependent upon their specific individual roles, least privileged access to restricted areas using multiple layers of access control.                  |
| <i>2.2.11.2.11 Office of Management and Budget (OMB) Circular A-130, —Management of Federal Information Resources]], and Appendix III, —Security of Federal Automated Information Systems, as amended</i> | Yes           | Project members will follow directives based on the Agency's security plan, training and reporting requirements and regular review of security plans.  |
| <i>2.2.11.2.12 OMB Memorandum M-04-04, —E-Authentication Guidance for Federal Agencies</i>  | Yes           | Staff will follow the Agency's identity and access management policies and procedures. During our security review we will discuss the posturing of the Agency for allowing remote access to systems.   |
| <i>2.2.11.2.13 FIPS PUB 199, Standards for Security Categorization of Federal Information and Information Systems</i>   | Yes           | We will use these scans to make sure that the overall security classification of the systems is not affected and, where required, we will develop a remediation plan.  |
| <i>2.2.11.2.14 FIPS PUB 200, —Minimum Security Requirements for Federal Information and Information Systems</i>   | Yes           | In accordance with the regulation, we will perform risk assessments to determine if controls are adequate and/or determine if additional controls are required to meet regulatory requirements.  |
| <i>2.2.11.2.15 NIST Special Publication 800-18 Rev 1, —Guide for Developing Security Plans for Federal Information Systems</i>  | Yes           | Team members will follow guidelines to developing security plans for MIMS and continually work with the Agency to identify areas of exposure and gaps. They will provide suggestions on ways to close gaps and address areas of exposure.  |
| <i>2.2.11.2.16 NIST Special Publication 800-30, —Risk Management Guide for Information Technology Security Risk Assessment Procedures for Information Technology Systems</i>                              | Yes           | Project management will implement risk management procedures as required by the Agency.  |
| <i>2.2.11.2.17 NIST Special Publication 800-34, —Contingency Planning Guide for Information Technology Systems</i>  | Yes           | The team will review current BCP/DR procedures during the turnover process. Where plans do not exist or gaps exist, we will work with the Agency to implement/correct them.  |



| Requirement   | Agree to Meet | Comment   |
|---|---------------|---|
| <i>2.2.11.2.18 NIST SP 800-37, Revision 1, —Guide for Applying the Risk Management Framework to Federal Information Systems: A Security Life Cycle Approach</i> | Yes           | We implement a comprehensive risk management program to monitor through automated monitoring, reporting to Agency personnel and periodic security reviews.  |
| <i>2.2.11.2.19 NIST Special Publication 800-47, —Security Guide for Interconnecting Information Technology Systems</i>  | Yes           | Our approach includes implementing comprehensive change management to provide for security analysis for interconnections prior to implementation.   |
| <i>2.2.11.2.20 NIST Special Publication 800-53 Revision 3, — Recommended Security Controls for Federal Information Systems</i>                                  | Yes           | Our security methodology and Compliance Accelerator are based on NIST 800-53 rev. 3 specifically.   |
| <i>2.2.11.2.21 NIST Special Publication 800-53A, —Guide for Assessing the Security Controls in Federal Information Systems</i>                                  | Yes           | The solution follows the guidance provided in NIST 800-53A when developing security assessment procedures for MMIS.   |
| <i>2.2.11.2.22 Payment Card Industry – Data Security Standard, PCI-DSS 2.0</i>  | Yes           | Our solution will include an interface with financial institutions that reconciles and receives payment between various payers and recipients using standard PCI compliant payment gateways. Configured during ACD, this functionality includes one-time and recurring payment transactions, support for ACH, eCheck, Credit Card and PayPal transaction types, refund transaction processing and chargeback handling.  |
| <i>2.2.11.2.23 Section 508 of the Rehabilitation Act of 1973</i>  | Yes           | The APHP portals are compliant with Section 508 of the Rehabilitation Act of 1973. The code review process during portal construction includes use of a code-level checklist and testing tools to verify compliance. We also include specific testing at both the product and project level for Section 508 compliance.   |
| <i>2.2.11.2.24 NIST Special Publication 800-88: Guidelines for Media Sanitization, September 2006.</i>  | Yes           | Security policies and standards mandate secure disposal of media. We encrypt all desktops and laptops to prevent data removal by unauthorized personnel. All unencrypted data is removed prior to allowing any device storing data to leave an Accenture location for the purpose of disposal.<br>Devices (for example, servers, desktops and laptops) containing storage media such as hard drives are randomly overwritten three times using our approved tools (for example, DBAN) or degaussed. We comply with Agency procedures for media sanitization, recognizing that the Agency is the data owner and is ultimately responsible for disposition. |
| <i>2.2.11.2.25 1.33.2 DoD 5220.22-M National Industrial Security Program Operating Manual (NISPOM), February 2006</i>   | Yes           | Our approach with this program as much as it pertains to this project and will abide by all Agency security procedures that are currently written to addresses sections in the NISPOM. However, requirements for accreditation will be initiated by the Agency  |
| <i>2.2.11.2.26 National Institute of Standards and Technology SP800 series</i>  | Yes           | The solution complies with SP800 as they pertain to systems and supporting infrastructure that Accenture is contracted to develop and/or maintain. Through our security monitoring service we will constantly monitor these controls and address gaps with the Agency as they are discovered.   |



| Requirement   | Agree to Meet | Comment  |
|---|---------------|--|
| <i>2.2.11.2.27 The Certification Commission for Health Care Information Technology Security Criteria for 2007 Certification of Inpatient Electronic Health Records (EHRs) and FIPS publication 140-2 issued May 25, 2001 and any later updates.</i> | Yes           | Our approach complies with the Agency's standards for vendors, versions, hardware, etc. that are approved and/or required for use in the Medicaid environment. We have experience using a FIPS 140-2 compliant encryption process (hardware based) creating 2 backup copies, 1 for on-site, 1 sent offsite on our Texas Medicaid project, backing up 100+ TB of data a week. |

## 4A.2.12 Compliance and Audits

### 2.2.12 Compliance and Audits

We will comply with all relevant procedures and processes to complete or assist with audits for compliance validation.

#### 4A.2.12.1 Accounting (response not required)

##### 2.2.12.1 Accounting

###### a. Reserved

#### 4A.2.12.2 Banking Policies

##### 2.2.12.2 Banking Policies

*The Contractor may receive checks or money orders related to the work that it performs. These checks and money orders may be for refunds, recoveries, cost settlements, premiums, or drug rebates. The Contractor shall meet the following requirements for checks or money orders.*

*a. Any unit that receives checks or money orders shall log and prepare all payments for deposit on the day of receipt and deliver them to the Revenue Collections contractor's designated point of contact for daily deposits.*

*b. Any unit that receives checks or money orders shall assist in the maintenance and updating of the existing check classification code schematic, as necessary.*

*c. Any unit that receives checks or money orders shall provide assistance to the Agency, Division of Fiscal Management, in the reconciliation of the monthly Title XIX Recovery bank account if requested to do so.*

*Only the Revenue Collections contractor will make the deposits.*

We are experienced in operating numerous incoming mailrooms for our clients and have the experience to receive, document, and execute specific special handling processes for these financial documents. Checks and money orders received in our MMIS mailroom receive special handling to comply with the Agency and/or the Division of Fiscal Management directives.

Checks and/or money orders can be received from numerous sources including refunds from providers or MCOs, recoveries from providers, banks or accountants, cost settlements from providers, accountants or attorneys, premiums from members, and drug Rebate payments from manufacturers

Prior to starting mailroom services, we work with the Agency and Revenue Collections contractor to review proposed processes and confirm documentation standards and controls. We schedule approval meetings with all parties during system implementation phase and test the processes during Operational Readiness Testing to confirm the controls and Agency banking policies. Each business day, mail is picked up from all sources and brought into our secure incoming mailroom. Additionally, a courier picks up and delivers mail to the mailroom from the designated locations. We train mailroom resources to recognize and prepare checks and money orders during the sort and scan process by separating the checks and associated documents to a separate queue for special handling and preparation for deposit the day of receipt.

Mailroom staff scan the check the additional contents if applicable and document/index the details of the check including, check issuer, check number, check amount, pay to, and memos in a check register. The scanning process assigns an Invoice Control Number (DCN), which provides the Year and Julian date of receipt. This process provides us with a scanned image should the sender have questions or for audit purposes.

The original Daily Log of checks and money orders is delivered to the Mailroom Supervisor, who prepares them for deposit per the process agreed to by the Agency and the Revenue Collections contractor. Our courier delivers the checks and money orders received and prepped for deposit to the Revenue Collections contractor. For reconciliation purposes, we would work with the Revenue Collections contractor for an attestation or log of the completed deposits to perform a count and dollar value deposit validation on a daily basis. Implementation of this control is a requirement for our other Finance based service delivery operations and we share this



experience along with other leading practices with the Revenue Collections contractor to identify other controls and practices that can continue to help improve the current business processes.

#### **Assist in Maintaining and Updating Existing Check Classification Code Schematic**

Check classifications and configuration of schematics changes as the policies and trading partners of the Agency evolve. As part of the end to end financial process and in our responsibilities supporting check and money order receipt, we understand that these codes are essential to the classification of financial transactions for documentation, audit, and control of the IME Accounting policies.

We work with the Agency, Revenue Collections contractor, and other agencies are necessary to assist in the process of updating and maintaining existing check classification codes. Our supervisory staff and Account Management participate in cross contractor governance discussions to continue to evaluate continuous improvement and process adherence. As part of these discussions or through other formal communications, our operations staff helps perform the required activities to modify existing check classification code schematics.

#### **Assist with Reconciliation of the Monthly Title XIX Recovery Bank Account**

Only the Revenue Collections contractor makes deposits. We have global scale and experience with Finance and Accounting service delivery methods and operations. We are responsible for participating in internal and external reconciliations across several industries, including Health and Public Service. While only responsible for certain areas of the check handling processes, we integrate our experience in these areas into the culture of our service delivery staff supporting the IME. In doing so, we provide assistance to the Agency, Division of Fiscal Management, in the reconciliation of the monthly Title XIX Recovery bank account if requested to do so. We have worked with its clients to develop processes supported by innovative and automated reconciliation processes and we bring that experience to the Agency.

#### **4A.2.12.3 Payment Error Rate Measurement (PERM) Project**

*2.2.12.3 Pursuant to the Improper Payments Information Act (IPIA) of 2002 and federal regulations at 42 CFR Parts 431 and 457 the Contractor shall be responsible for providing necessary data, reports, and expert knowledge to related to the pricing and payment of claims and that the requirements related to PERM are fully satisfied.*

The project team will provide necessary data, reports, and expert knowledge to related pricing and payment of claims so that the requirements related to PERM are fully satisfied.

#### **4A.2.12.4 Regulatory Compliance**

##### **2.2.12.4 Regulatory Compliance**

*The Contractor shall assure that all goods and services provided are to be fully compliant with Agency and federal requirements (including HIPAA requirements) at all times.*

We are accustomed to following and maintaining regulatory compliance within the United States and countries around the world. APHP is an interoperable framework of COTS products. The system service components within the solution are compliant with state and federal requirements (including HIPAA) that are in effect as of the proposal submittal date. APHP is designed to provide the Agency a COTS-based solution that meets current regulatory requirements (including HIPPA security requirements) and provides the framework for quick adaptation to new requirements as applicable. APHP supports current standards, including HIPAA X12, 5010, ICD-10, and NPI. COTS products vendors that are a part of our solution maintain their software in line with industry standards to meet applicable federal, business, functional and data exchange requirements.

Automated tools and operating procedures help validate that in-scope regulatory requirements including HIPAA are met at all times. Our Security Operations team will be staffed with an individual that has compliance management responsibility. Monthly compliance reports will be generated and shared with the Agency.

#### **4A.2.12.5 Audit Support**

##### **2.2.12.5 Audit Support**

*The Contractor shall support and provide assistance with any state and federal audits and certifications as the Agency requests. Examples include but are not limited to the annual audit that the state auditor's office conducts (e.g., the Medicaid Integrity Group (MIG) review and the Office of the Inspector General (OIG) audits specified in the contract).*

Various sources will request the Agency for audits and certifications of the new MMIS including the annual audit that the state auditor's office conducts (e.g., the Medicaid Integrity Group (MIG) review and the Office of the Inspector General (OIG) audits specified in the contract). We collaborate with the Agency or State auditors





to address the focus of each audit. We view audits across four distinct phases and discuss each in the remaining section: Audit Preparation, Initial Audit Meeting, Audit, Exit briefing.

**Audit Preparation.** As soon as the Agency notifies the Account Manager of an audit request and the parameters of the audit, the team starts the preparation for the requested audit immediately.

The State is the sole point of contact with the source requesting the audit, such as a federal audit. Our approach includes supporting the Agency or State auditors with:

- Access to our processing facility, which could include providing a tour of the facility for the auditors or a conference room to perform the audit.
- Access to the requested information, which could include claims processing reports, claims or claiming documents, provider or member data, reference or pricing data.
- APHP and COTS information, which could include use cases, implementation documentation, or programs or libraries. Our team is available to deliver a demonstration of the APHP solution for auditors.
- Documentation, which could include Standard Operating Procedure manuals, provider manuals, contract memos, MMIS status reports and system documentation.
- The assigned Accenture Commercial Director has the responsibility to assist in the gathering of our responses to various audits. This lead acts as the single point of contact for audit coordination activities for the security team.

A pre-audit meeting is scheduled with the Agency or State auditors to review and evaluate the audit program for each audit prior to the Initial Audit Meeting. The audit program defines the scope of the audit and the requested materials. During this meeting, we work with the Agency or State auditors to define our role and responsibilities during the audit.

**Initial Audit Meeting.** At the request of the Agency or State auditors we attend the initial audit meeting. During this meeting, we are prepared to demonstrate APHP and answer questions about our Iowa MMIS Operations. If requested, we present the audit materials and provide an explanation of how and when the materials were produced. For example, during an audit of our claims processing operations we might describe the incoming mailroom operations, how an ICN/TCN are affixed to documents and electronic claims, and the scanning process.

**Audit.** Project team members will remain on standby to respond to specific requests from the Agency or State auditors for additional information or clarifications. Our Quality Manager is the single point of contact for the Agency or State auditors during the audit to eliminate delays in responding to requests for documents, data or to respond to questions.

For instance, an auditor reviewing processed claims may request the original claim for an adjusted claim. Team personnel will provide either the original claim or image of the original claim retrieved and delivers it to the Agency or State auditor. As an example, the SSAE-16 (formerly SAS-70) audit is one of an average of 5-6 technical audits (i.e. A-133, HHSC / OIG, internal Accenture, etc.) Texas Medicaid participates in annually, in addition to ad-hoc audits required by the Federal or State government. Project staff will help coordinate and facilitate the technical aspects of the audit, related to the technical infrastructure, application services, and program management of the project. They will work with the auditors prior to the beginning of the audit to collect preliminary requested documentation and to facilitate meetings and interviews with the appropriate team members throughout the audit. Accenture is then responsible for providing management responses to any technology related findings following the release of the audit report.

**Exit Briefing.** At the request of the Agency or the State auditors we attend the exit briefing. When requested, our quality assurance team reviews the findings of the audit. Findings may be in the form of additional questions or recommendations for improvement. Our team will work with the Agency and State auditors to respond to audit findings quickly and efficiently. Through the project lifecycle, we meet with the Agency and State auditors to fine tune our procedures for audit support.